





Employer's Address: \_\_\_\_\_

\_\_\_\_\_

Salary or wages per month: \_\_\_\_\_

Type of work: \_\_\_\_\_

If you are presently unemployed, state:

Date of last employment: \_\_\_\_\_

Salary or wages per month: \_\_\_\_\_

Type of work: \_\_\_\_\_

c.) Please list any other income received within the past twelve months:

**(Write the gross amount (before taxes) per month that you received and the months you received this income.)**

Business or profession: \_\_\_\_\_

Other self-employment: \_\_\_\_\_

Interest: \_\_\_\_\_

Dividends: \_\_\_\_\_

Pension and annuities: \_\_\_\_\_

Social security benefits: \_\_\_\_\_

Support payments: \_\_\_\_\_

Disability payments: \_\_\_\_\_

Unemployment compensation and/or supplemental benefits:

\_\_\_\_\_

Workers' Compensation: \_\_\_\_\_

Public assistance: \_\_\_\_\_

Other: \_\_\_\_\_

d.) Other contributions to household support:

**(Write the gross amount (before taxes) per month that you received and the months you received this income.)**

(Wife) (Husband) Name: \_\_\_\_\_

If your (wife) (husband) is employed, please state

Employer: \_\_\_\_\_

Salary or wages per month: \_\_\_\_\_

Type of work: \_\_\_\_\_

Contributions from children: \_\_\_\_\_

Contributions from parents: \_\_\_\_\_

Other contributions: \_\_\_\_\_

e.) Property owned:

Cash: \_\_\_\_\_

Checking Account: \_\_\_\_\_

Savings Account: \_\_\_\_\_

Certificates of deposit: \_\_\_\_\_

Real estate (including home): \_\_\_\_\_

Motor Vehicle: Make \_\_\_\_\_, Year \_\_\_\_\_,

Cost: \_\_\_\_\_ Amount Owed: \_\_\_\_\_

Stocks and bonds: \_\_\_\_\_

Other: \_\_\_\_\_  
\_\_\_\_\_

f.) Debts and obligations:

Mortgage: \_\_\_\_\_

Rent: \_\_\_\_\_

Loans: \_\_\_\_\_

Other: \_\_\_\_\_  
\_\_\_\_\_

**(Write all of your regular monthly bills, phone, utilities, cable, insurance, etc.)**

g.) Persons dependent upon you for support:

(Wife/Husband) Name: \_\_\_\_\_

Children, if any:

Name: \_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other persons:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

4. I understand that I have a continuing obligation to inform the court of improvement in my financial circumstances which would permit me to pay the costs incurred herein.

5. I verify that the statements made in this affidavit are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities.

Date: \_\_\_\_\_

\_\_\_\_\_  
PETITIONER