

In **4a**, check "Yes" if you applied for at least 1 of the benefits listed in **3**.

In **4b**, check the box for each type of money you or the person on whose behalf this *Application* is being filed have received in the past month. Enter the gross (before taxes) amount for each type.

Under **Other** in **4b** and **4c**, include any money received from family or friends.

In **4c**, check the box for each type of money you or the person on whose behalf this *Application* is being filed have received in the past 12 months. Enter the total gross (before taxes) amount for each type.

In **4d**, check all of your debts and expenses for the past month and list the amount of money you pay each month for that expense.

In **4e**, check all of the items owned by you and list the value of each item. If you own real estate, include the total you owe on any mortgage.

The judge will notify you if you need to go to court more information. This may include documents showing your income, value of belongings (including real estate) and expenses.

4. I checked "No" in Section 3, so I am providing the following financial information:

a. I have a pending application for 1 or more of the benefits listed in Section 3:

Yes No

b. I received the following money in the past month. *(check all that apply)*

- My employment: \$ _____ Social Security (not SSI): \$ _____
- Child support: \$ _____ Unemployment: \$ _____
- Pension: \$ _____
- Money from other household members: \$ _____
- Other *(list type and amount)*: _____ \$ _____
- No income

Total of all money received in the past month: \$ _____

c. I received the following total amount of money in the past 12 months. *(check all that apply)*

- My employment: \$ _____ Social Security (not SSI): \$ _____
- Child support: \$ _____ Unemployment: \$ _____
- Pension: \$ _____
- Money from other household members: \$ _____
- Other *(list type and amount)*: _____ \$ _____
- No income

Total of all money received in the past 12 months: \$ _____

d. My current monthly expenses are listed below. *(check all that apply)*

- Rent: \$ _____ per month
- Home Mortgage: \$ _____ per month
- Other Mortgage: \$ _____ per month
- Utilities: \$ _____ per month
- Food: \$ _____ per month
- Medical: \$ _____ per month
- Car Loan: \$ _____ per month
- Childcare: \$ _____ per month
- Child Support: \$ _____ per month
- Other *(list type and amount)*: _____ \$ _____
- I have no expenses.

Total of all expenses: \$ _____ per month

e. I have the belongings listed below. *(check all that apply)*

- Bank accounts and cash totaling: \$ _____
- Home worth: \$ _____
The total I owe on my home mortgage is: \$ _____
- Other real estate, not including the house I live in, worth: \$ _____
The total I owe on my other mortgage is: \$ _____
- 1st vehicle worth: \$ _____ The 1st vehicle is paid off: Yes No
- 2nd vehicle worth: \$ _____ The 2nd vehicle is paid off: Yes No
- Other *(list items and their value)*: _____ \$ _____
- None of the above

