

IN THE TULALIP TRIBAL COURT TULALIP INDIAN RESERVATION TULALIP, WASHINGTON

Petitioner: and Respondent:		Case No FINANCIAL DECLARATION OF (check one): □ PETITIONER □ RESPONDENT	
	of education you completed:		
Occupation:			
Are you curre	ently employed? (check one): \square Yes. \square 1	No.	
If Yes :	If Yes: List the date you were hired (month/year):		
	List the name and address of your emplo	oyer:	
If <i>No</i> :	List the last date you worked(month/year):		
	List your gross earnings:		
	ARY OF FINANCIAL INFORMATION is section after filling out the rest of this for	·m.)	
Total Mont	thly Net Income (copy total from 3.3(c) be	low)	\$
Total Monthly Household Expenses (copy total from 5.9 below)		\$	
Total Monthly Debt Expenses (copy total from 5.11)			\$
Total Monthly Expenses (copy total from 5.12)		\$	
Estimate of the Other Party's Gross Monthly Income (from 3.1(f) below)		\$	



III. INCOME INFORMATION

List monthly income and deduction below for you and the other person in your case. If your case involves child support, this same information is required on your Child Support Worksheets. If you do not know the other person's financial information, give an estimate.

Tip: If you do not get paid once a month, calculate your monthly income wages and salaries like this: If you are paid on a weekly basis, multiply your weekly gross pay by 4.3 to determine your monthly wages and salaries (monthly income = weekly gross x 4.3). If you are paid every two weeks, multiply your gross pay by 2.15 (monthly income = 2-week x 2.15). Finally, if you are paid twice monthly, multiply your gross pay by 2 (monthly income = twice a month pay x 2).

3.1 GROSS MONTHLY INCOME (before taxes, deductions, or retirement contributions)		
	You	Other Party
a. Wages & Salaries	\$	\$
b. Interest & Dividend Income	\$	\$
c. Business Income	\$	\$
d. Spousal Maintenance from Other Relationships	\$	\$
e. Other Income	\$	\$
f. Total Gross Monthly Income (add all lines above)	\$	\$
g. Actual Gross Income for (year-to-date)	\$	\$

3.2 MONTHLY DEDUCTIONS FROM GROSS INCOME		
	You	Other Party
a. Income Taxes (federal and state)	\$	\$
B. FICA (Soc.Sec. + Medicare) or Self-Employment Taxes	\$	\$
c. State Industrial Insurance Deductions	\$	\$
d. Mandatory Union/Professional Dues	\$	\$
e. Pension Plan Payment	\$	\$
f. Spousal Maintenance Paid	\$	\$
g. Normal Business Expenses	\$	\$
h. Total Deductions from Gross Income (add all lines above)	\$	\$

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3.3 NET MONTHLY INCOME		
	You	Other Party
a. Total Gross Monthly Income (from 3.1(f) above)	\$	\$
b. Total Monthly Deductions (from 3.2(h) above)	\$	\$
c. Net Monthly Income (3.3(a) minus 3.3(b))	\$	\$

3.4 MISCELLANEOUS INCOME (Do not repeat income you already listed above.)		
(Provide source of other income)	You	Other Party
a. Child Support Received from Other Relationships	\$	\$
b. Other Income (from:)	\$	\$
c. Other Income (from:)	\$	\$
d. Other Income (from:)	\$	\$
e. Other Income (from:)	\$	\$
f. Total Miscellaneous Income (add all lines above)	\$	\$

3.5 HOUSEHOLD INCOME (Monthly income of other adults living in the home)		
	Your Home	Other Party's Home
a. Other Adult's Gross Income (Name:)	\$	\$
b. Other Adult's Gross Income (Name:)	\$	\$
c. Other Adult's Gross Income (Name:)	\$	\$
d. Total Household Income of Other Adults in the Home (add all lines above)	\$	\$

3.6 DISPUTED INCOME – If you disagree with the other party's statements about anyone's income, explain why the other party's statements are not correct and explain why your statements are correct. (State monthly income you believe is correct and explain.)	



IV. AVAILABLE ASSETS

List your liquid assets that can be easily cashed.		
a. Cash on hand	\$	
b. Money in all checking & savings accounts	\$	
c. Stocks, bonds, CDs, and other liquid financial accounts	\$	
d. Cash value of life insurance	\$	
e. Other liquid assets ()	\$	
f. Total Available Assets (add all lines above)	\$	

V. MONTHLY EXPENSES AFTER SEPARATION

Tell the court what your monthly expense are (or will be) after separation. If you have dependent children, your expenses must be based on the parenting plan or schedule you expect to have for the children.

Monthly expenses	for mysalf and	(number of denon	dontale	0.00
wionthly expenses	for myself and	tnumper of aepen	dents):	are:

5.1 HOUSING	
Rent / Mortgage / Contract Payment	\$
Installment payments for other mortgages or encumbrances	\$
Property taxes (if not in monthly mortgage payment)	\$
Homeowner's or Rental Insurance	\$
Total Housing Expenses	\$
5.2 UTILITIES	
Heat (gas & oil)	\$
Electricity	\$
Water, Sewer, & Garbage	\$
Telephone(s)	\$
Cable & Internet	\$
Other (specify):	\$
Total Utilities Expenses	\$



5.3 FOOD & HOUSEHOLD SUPPLIES			
Food for (number of people):	\$		
Supplies (paper, cleaning, pets)	\$		
Meals eaten out	\$		
Other (specify):	\$		
Total Food & Household Supplies Expenses	\$		
5.4 CHILDREN'S EXPENSES			
Childcare / Babysitting	\$		
Clothing & Diapers	\$		
Tuition (if any), After-School Programs, Lessons	\$		
Other expenses for children (specify):	\$		
Total Children's Expenses	\$		
5.5 TRANSPORTATION			
Vehicle Payments (loan or lease)	\$		
Vehicle Insurance & License Fees	\$		
Gas, oil, and vehicle maintenance	\$		
Parking, Tolls, & Public Transportation	\$		
Other transportation expenses (specify):	\$		
Total Transportation Expenses	\$		
5.6 HEALTH CARE EXPENSES (omit if fully covered)			
Insurance Premium (health, vision, dental)	\$		
Uninsured dental, orthodontic, medical, eyecare expenses	\$		
Other health expenses not covered by insurance (specify):	\$		
Total Health Care Expenses	\$		



5.7 PERSONAL EXPENSES (not including children)		
Clothing	\$	
Hair care / personal care	\$	
Recreation & Clubs	\$	
Education	\$	
Books, Newspapers, Magazines, & Photos	\$	
Gifts	\$	
Other (specify):	\$	
Total Personal Expenses	\$	
5.8 MISCELLANEOUS EXPENSES		
Life Insurance (if not deducted from income)	\$	
Other (specify):	\$	
Other (specify):	\$	
Other (specify):	\$	
Total Miscellaneous Expenses	\$	

5.9 TOTAL HOUSEHOLD EXPENSES	¢
(add totals from 5.1 through 5.8 above)	Ф

5.10 INSTALLMENT DEBTS IN MONTHLY EXPENSES (listed in 5.1 through 5.8 above)

Describe any debts that you pay in installments that you included above in 5.1 through 5.8.

Name of Creditor (who you owe)	Description of Debt (mortgage, car loan, etc.)	Balance Remaining (amount you owe now)	Date of Last Monthly Payment made
		\$	Date:



5.11 OTHER DEBTS & MONTHLY EXPENSES (not included in 5.1 through 5.10 above)

Name of Creditor (who you owe)	Description of Debt (mortgage, car loan, etc.)	Balance Remaining (amount you owe now)	Last Monthly Payment (date and amount)	
		\$	Date:	\$
		\$	Date:	\$
		\$	Date:	\$
		\$	Date:	\$
		\$	Date:	\$
Total Monthly Payments for Other Debts & Monthly Expenses				\$

5.12 TOTAL MONTH	LY EXPENSES (add totals from 5.9 and 5.11) \$	
5.13 EXPLANATION	OF EXPENSES OR DEBTS (if any needed)		
VI. ATTORNEY FEES	\mathbf{S}	_	
6.1 Amount paid for attorney fees and costs to date		\$	
The source of the money	y you used to pay these fees and costs (specify):		
6.2 Amount still owed	\$		
6.3 Total attorney fees	\$		
Describe your agreemen	t with your lawyer to pay for your fees and costs	:	
I declare under penalty of that the foregoing is true	of perjury under the laws of the Tulalip Tribes and correct.	and the State of Washington that	
Signed at (city and state)):		
>			
Signature	Print Name	Date	

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