| I | N THE CIRCUI | T COURT OF _ | (County v | vhere court is lo | , MISSOURI |
|---------------------------------|--------------|--------------|-----------|-------------------|-------------|
| In re the Marri | age of | | |) | |
| (First) Petitioner, | (Middle) | (Last) | | (Jr./Sr./III) | Case No |
| -and- (First) Respondent. | (Middle) | (Last) | | (Jr./Sr./III) | Division No |

WARNING: Read Carefully

You are encouraged to consult with a lawyer in the preparation of this document and the presentation of your case to the court. A dissolution of marriage proceeding can substantially affect your financial and personal life for many years. A lawyer is trained to assist you in protecting your rights.

Statement of Income and Expenses

Are you Petitioner or the Respondent? (Check one of these boxes)

I am the Petitioner. (The party that filed the original petition)

I am the Respondent. (The party that answers the original petition filed by his or her spouse)

Are you the Husband or the Wife? (Check one of these boxes)

I am the Wife.

I am the Husband.

You must fill in the amounts for both you and your husband or wife. If you do not know the exact amount for your spouse, you should estimate the amount to the best of your ability. DO NOT LEAVE THESE AMOUNTS BLANK.

Why does the court require this information?

The amount of income and expenses of each party is significant in a dissolution of marriage proceeding for several reasons. First, if there are unemancipated children born of the marriage, the court must determine the amount of child support to be paid by one party to the other party. Missouri Supreme Court Rule 88.01 and Form 14 provide the basis for the calculation of a presumed amount of support. The amounts you enter on this "Statement of Income and Expenses" may be used by the court in calculating the amount of child support.

Second, the amounts entered on this "Statement of Income and Expenses" may be used by the court in determining whether one party is entitled to maintenance. Maintenance is spousal support paid by one party to the other. Maintenance was formerly called alimony. If a party does not receive maintenance at the time of dissolution, and the judgment is not subject to modification, the party cannot come back to court to request maintenance in the future. A party may be entitled to maintenance if the party lacks sufficient property to provide for his or her reasonable needs or if the party is unable to support him or herself through appropriate employment. See RSMo. §452.335.

Third, income and expense amounts may be used by the court in determining the amount of attorney's fees to be awarded a party. The court has the power to order one party to pay the other party's attorney's fees. RSMo. §452.355.

If you cannot accurately estimate the income and expenses of your spouse, there are methods available to discover exactly how much your spouse earns and spends. These methods are usually beyond the ability of non-lawyers, and it is strongly suggested that if you do not have an accurate estimate of how much your spouse earns and spends, and these issues would be relevant to your case, then you should contact a lawyer to assist you.

The court may require you to file a more complete "Statement of Income and Expenses". This would include a more detailed analysis of income and expenses.

Please type or print clearly in black ink. A copy of this form MUST be sent to your spouse. The information in this form is open to the public.

All pleadings that you file with the court are required to contain the case number and division number (if applicable). Failure to include the case number on your pleading may cause your pleading to be filed in the wrong case. If your case has not yet been filed, then you do not have to enter the cause number on this form.

You must fill in all blanks for Husband <u>and</u> Wife with an amount even if the amount is zero.

| 1. INCOME | WIFE | HUSBAND | | |
|---|------|---------|--|--|
| MONTHLY GROSS INCOME – Enter one-twelfth of the party's yearly gross income (Income before any taxes or other withholding). This is the amount of money you earn BEFORE any deductions or taxes. | | | | |
| Instructions to Question 1 - "Gross income" includes, but is not limited to, salaries, wages, commission, dividends, severance pay, pensions, interest, trust income, annuities, partnership distributions, social security benefits, retirement benefits, workers' compensation benefits, unemployment compensation benefits, disability insurance benefits, veterans' benefits, and military allowances for subsistence and quarter. | | | | |
| Overtime compensation, bonuses, earning from secondary employment, recurring capital gains, prizes, retained earnings and significant employment-related benefits may be included in whole or in part. If a party is unemployed or found to be underemployed, "gross income" may be based on imputed income. Excluded from "gross income" is temporary assistance for needy families (TANF) payment, Medicaid benefits, supplemental security income (SSI) benefits, food stamps, general assistance benefits, other public assistance benefits have eligibility based on income and | | | | |

child support received for children not the subject of this proceeding.

If a party receives rents or royalties or is self-employed, in a sole proprietorship, or business with joint ownership, "gross income" is gross receipts minus the ordinary and necessary expenses incurred to produce such receipts. Depreciation, investment tax credits and other noncash reduction of gross receipts may be excluded from such ordinary and necessary expenses.

| 2. MAINTENANCE RECEIVED | WIFE | HUSBAND |
|--|------|---------|
| A. MAINTENANCE RECEIVED EACH MONTH IN THIS CASE – These are same numbers from Line 6A in different columns | | |
| B. MAINTENANCE RECEIVED EACH MONTH FROM OTHER CASES | | |
| C. TOTAL MAINTENANCE RECEIVED EACH MONTH – Enter the total monthly amount of court ordered maintenance that each party actually receives. (Line A plus Line B) | | |

Instructions to Question 2 – This amount refers to maintenance that either party receives. The amount of maintenance to be paid by either Husband or Wife should be included in your answer to Question 6. LINE C SHOULD BE THE SUM OF LINE A AND LINE B.

| 3. CHILD SUPPORT RECEIVED FOR UNEMANCIPATED CHILDREN <u>NOT</u> OF THIS MARRIAGE | WIFE | HUSBAND |
|--|------|---------|
| How many children does each party have in his or her custody that are not the subject of this proceeding? | | |
| CHILD SUPPORT RECEIVED EACH MONTH FOR UNEMANCIPATED CHILDREN <u>NOT</u> OF THIS MARRIAGE – Enter the monthly amount of any child support that each party actually receives for unemancipated children not of this marriage. | | |
| · · · · · · · · · · · · · · · · · · · | | |

Instructions to Question 3 – The first part of this question asks you for the number of children in each person's custody that are not children involved in this case. The second part of this question refers to child support that either party receives from some third person not a party to this proceeding. Normally this would be child support received by Husband or Wife for children from a previous marriage or relationship. THIS AMOUNT DOES NOT INCLUDE CHILD SUPPORT PAID FOR THE UNEMANCIPATED CHILDREN OF THIS MARRIAGE.

| 4. TOTAL MONTHLY INCOME | WIFE | HUSBAND | |
|---|------|---------|--|
| TOTAL INCOME | | | |
| Instructions to Question 4 – Enter the total of the amounts you entered in Questions 1, 2c and 3. | | | |

| 5. OTHER CHILD SUPPORT OBLIGATIONS FOR UNEMANCIPATED CHILDREN THAT ARE <u>NOT</u> OF THIS MARRIAGE | WIFE | HUSBAND |
|--|------|---------|
| OTHER CHILD SUPPORT OBLIGATIONS EACH MONTH – Enter the monthly amount of any other court or administrative order for child support to the extent of the amounts actually being paid toward the current support of any child not the subject of this proceeding. | | |

Instructions to Question 5 - Enter the amount of any court ordered child support that is actually being paid by one of the parties for unemancipated children <u>not</u> of this marriage that are not in that party's custody.

| 6. MAINTENANCE PAID | WIFE | HUSBAND |
|--|------------------------|---------------------|
| A. MAINTENANCE PAID EACH MONTH IN THIS CASE – These are same numbers from Line 2A in different columns | | |
| B. MAINTENANCE PAID EACH MONTH IN OTHER CASES | | |
| C. TOTAL MAINTENANCE PAID EACH MONTH – Enter the total monthly amount of court ordered maintenance that each party actually pays for current maintenance. (Line A plus Line B) | | |
| Instructions to Question 6 – This amount refers to maintenance that either party pays. The either Husband or Wife should be included in your answer to Question 2. | e amount of maintenanc | e to be received by |

NOTE: Questions 7 through 10 apply only if there are unemancipated children of <u>this</u> marriage. If there are no unemancipated children of this marriage, then you do not have to answer questions 7 through 10 inclusive. You must still answer Questions 11 and 12.

| 7. CHILD CARE COSTS FOR UNEMANCIPATED CHILDREN OF THIS MARRIAGE | WIFE | HUSBAND |
|--|------|---------|
| CHILD CARE COSTS FOR UNEMANCIPATED CHILDREN OF THIS MARRIAGE EACH MONTH – If there are unemancipated children of this marriage, enter the monthly amount of work-related child care costs incurred by each parent as a result of his or her employment. | | |

Instructions to Question 7 - Do not answer this question unless you have unemancipated children of this marriage.

Enter the monthly amount of any reasonable work-related child care costs incurred or to be incurred by each parent for the unemancipated children of this marriage.

It is preferable to include the reasonable work-related child care costs of the parent entitled to receive support in the calculation of the presumed child support amount pursuant to Form 14. Include above ONLY the amounts you intend to include in your Form 14 child support calculation.

However, the work-related child care costs may be excluded from calculation of the presumed child support amount if an event that will significantly affect the amount paid for work-related child care, such as a child's entry into school, will occur with predictability within a short period of time.

| 8. HEALTH INSURANCE COSTS FOR UNEMANCIPATED CHILDREN OF THIS MARRIAGE | WIFE | HUSBAND |
|--|------|---------|
| HEALTH INSURANCE COSTS FOR UNEMANCIPATED CHILDREN OF THIS MARRIAGE EACH MONTH – If there are unemancipated children of this marriage, enter the monthly amount of health insurance costs for these children only. | | |

Instructions to Question 8 – Do not answer this question unless you have unemancipated children of <u>this</u> marriage. Enter the monthly amount of any premium paid to be paid or deducted or to be deducted by an employer from gross monthly income for health insurance policies for the unemancipated children of <u>this</u> marriage.

These amounts should be included on Form 14, Line 6c.

| 9. UNCOVERED EXTRAORDINARY MEDICAL COSTS FOR UNEMANCIPATED CHILDREN OF THIS MARRIAGE | WIFE | HUSBAND |
|---|------|---------|
| UNCOVERED EXTRAORDINARY MEDICAL COSTS FOR UNEMANCIPATED CHILDREN OF THIS MARRIAGE EACH MONTH– If there are unemancipated children of this marriage, enter the monthly amount of medical and/or dental expenses not covered by health insurance for these children only. | | |

Instructions to Question 9 – Do not answer this question unless you have unemancipated children of this marriage.

Enter the monthly amount of any uninsured extraordinary medical costs paid or to be paid by the parent by agreement or pursuant to court order for the unemancipated children of <u>this</u> marriage. Include above ONLY the amounts you intend to include in your Form 14 child support calculation.

"Extraordinary medical costs" are predictable and recurring, such as expenses for dental treatment, orthodontic treatment, asthma treatment and physical therapy. Medical and dental expenses incurred for single occurrence illnesses or injuries that are not covered or fully paid under any health insurance policy should be handled by separate order and should not be included above.

"Uninsured medical costs" are reasonable and necessary medical and dental expenses, as defined by section 213 IRC, incurred for the children who are the subject of this proceeding, to the extent that the uninsured portion of such expenses, including any deductibles and co-payments, exceeds \$250.00 per year per child. See Form 14, Line 6d, Comment A.

| 10. EXTRAORDINARY EXPENSES OF UNEMANCIPATED CHILDREN OF THIS MARRIAGE | WIFE | HUSBAND |
|--|------|---------|
| EXTRAORDINARY EXPENSES OF UNEMANCIPATED CHILDREN OF THIS MARRIAGE EACH MONTH – If there are unemancipated children of this marriage, enter the monthly amount of any extraordinary expense for these children only. | | |

Instructions to Question 10 – Do not answer this question unless you have unemancipated children of this marriage.

Enter the monthly amount of any other extraordinary child-rearing costs paid or to be paid by the parent by agreement or pursuant to court order for the unemancipated children of <u>this</u> marriage. Include above ONLY the amounts you intend to include in your Form 14 child support calculation.

"Other extraordinary child-rearing costs" may include, but are not limited to, post-secondary educational expenses and private or parochial elementary, middle and high school expenses, the cost of tutoring sessions, special or private elementary and secondary schooling to meet the particular educational needs of a child, camps, lessons, travel and other activities intended to enhance the athletic, social or cultural development of a child.

An order may include the cost of tuition, room and board, books, fees and other reasonable and necessary expenses. In determining the amount of these expenses, scholarships, grants, stipends and other cost-reducing programs available to the child should be considered." Form 14, Line 6e, Comment A

| 11. OTHER MONTHLY EXPENSES | WIFE | HUSBAND |
|----------------------------|------|---------|
| OTHER MONTHLY EXPENSES - | | |

Instructions to Question 11 – Enter the total amount of all other monthly expenses not listed above. This includes the following: Rent or mortgage payments, home maintenance, condominium or subdivision fees, gas, electric, water, telephone, trash service, sewer, cable television, internet service, home security, gas and oil for automobiles, automobile maintenance, taxes and licenses for automobile, payments on automobile loans, life insurance, health insurance (other than health insurance for unemancipated children of this marriage), disability insurance, automobile insurance, pension payments, installment loan payments, church and charitable contributions, food, clothing, medical and dental expenses, recreation, laundry and cleaning, personal care, educational expenses, other transportation costs, union dues, additional tax liability, gifts, vacations, newspapers and other periodicals, pet expenses, counseling, and any other miscellaneous expenses not listed above.

| 12. TOTAL EXPENSES | WIFE | HUSBAND |
|---|------|---------|
| TOTAL MONTHLY EXPENSES | | |
| Instructions to Question 12 - Enter the total of the amounts you entered on Questions 5 through 11 inclusive. | | |

I certify under oath that I have given my spouse a copy of this Statement of Income and Expenses pursuant to Missouri Supreme Court Rule 43.01(d) by: (You MUST check at least ONE of the following four boxes)

| | Serving a copy with the petition. | | |
|----------|--|----|----------|
| | Mailing a copy to my spouse or his or her attorney on, | 20 | _ at the |
| followin | g address: | | - |

| | (Street) | | | | |
|-----------------|--|---------|-------|------|----------------|
| | (City) | (State) | (Zip) | | |
| number) | Handing a copy to my spor Sending a copy to my spor on, 20 | | | , 20 | (telephone |

Instructions: The following information MUST be filled in before a notary public. This Statement of Income and Expense is required to be verified before a notary public. The "Affiant" is the person that is completing this document.

| COUNTY OF | = |) |
|------------|---|-------|
| | |) ss. |
| STATE OF _ | |) |

Affiant, of lawful age, being duly sworn on his or her oath, states that he or she is the affiant named herein and that the facts stated in this Statement of Income and Expenses are true according to his or her best knowledge and belief.

| Affiant – SIGN HERE | Affiant – PRINT YOUR NAME HERE |
|---------------------------------------|--------------------------------|
| Subscribed and sworn to this day of _ | , 20 |
| Notary Public | |
| My Commission Expires: | |