



Forest County Potawatomi
Tribal Child Support

P.O. Box 340 Crandon, WI 54520
Phone: (715) 478-7260 Fax: (715) 478-7331
Toll Free: 800-960-5470

POTAWATOMI
(Keeper of the Fire)

FINANCIAL DISCLOSURE

Your Name:

Number of dependents claimed on taxes:

Social Security Number:

Date of Birth:

Address:

Child(ren) Name	Child Residing With You	Date of Birth	Social Security Number
	Yes No		
	Yes No		
	Yes No		
	Yes No		

YOU MUST ATTACH COPIES OF YOUR TAX RETURNS FOR THE LAST TWO YEARS AND COPIES OF WAGE STATEMENTS FROM YOUR EMPLOYER (OR PAYCHECK STUBS) FOR THE LAST FOUR (4) WEEKS.

Employer Name:

Occupation:

Employers Address:

Address City, State, Zip

Hourly rate of Pay: \$

If salaried \$

Pay period:

(Weekly, Bi-Weekly, Monthly)

Pay above is for:

(Weekly, Bi-Weekly, Monthly, Yearly)

Average Hours per week:

If paid weekly x 4.3, biweekly x 2.15

Gross Monthly Income: \$

<u>OTHER SOURCES OF INCOME:</u>	(Monthly)	% Tax Paid
Public Assistance:	\$	
Rental Income	\$	
Maintenance/Alimony	\$	
Bonus/Commissions	\$	
Voluntarily Deferred Income	\$	
Pensions & Retirement:	\$	
Social Security	\$	
Worker's Unemployment Compensation	\$	
Dividends/Interest/Capital Gains	\$	
Military/Veterans	\$	
Business/Farm/Jobs for Cash	\$	
Any other Source (Specify)	\$	
Total Gross Income:	\$	

Do you have a high school diploma or its equivalent? YES NO
Do you have education beyond High School or special skills? YES NO

School/Training: Years:
School/Training: Years:

OTHER ASSETS

Bank Accounts:

Name & Address of Institution	Type of account	Average bal. over 6 months
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Name & Address of Institution	Type of account	Average bal. over 6 months
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Real Estate:

Address/Location	\$ Mortgage Balance	Type of Interest
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Insurance:

Type of Ins. and Issuing Company	Beneficiary	\$ Face Value	\$ Cash Value
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Vehicles (All types of motorized):

Type/Make/Year	\$ Loan Bal.	\$ Value
	\$	\$

Stocks & Securities:

No. Shares	\$ Value	Issuer
	\$	

Type/Make/Year	Loan Bal.	Value	No. Shares	Value	Issuer
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Other Assets:

List any other item that has a value of \$250.00 or more including collectibles, equipment, machinery, furniture, electronics, precious metals or stones, tools and implements.

Type of Asset	Outstanding Loan	Net Value
	\$	\$
	\$	\$
	\$	\$
	\$	\$

FUTURE INCOME

When do you expect to receive the next pay raise from your employer?

What is the amount of your last two (2) pay raises? \$ _____ \$ _____

Do you expect to receive monies, from any source, in the next year? YES NO

If "YES" from what source and when?

EXPENSES

Mortgage or rent:	\$	Per Month
Property Taxes:	\$	Per Month
Personal Taxes: State of WI	\$	Per Month
Federal	\$	Per Month
Utilities: Electric	\$	Per Month
Gas/Wood	\$	Per Month
Water/Sewer	\$	Per Month
Telephone	\$	Per Month
Travel-gas to/from work	\$	Per Month
Educational Expenses i.e. School enrollment fees, books, school lunches, field trips	\$	Per Month
Medical Expenses:	\$	Per Month
Household Food Costs	\$	Per Month
Clothing	\$	Per Month

I declare under penalty of perjury that the foregoing and any attachments hereto are true and correct. Dated this _____ day of _____, 20____.

Signature

Print Name