

AFFIDAVIT CONCERNING DEPENDENT CHILDREN AND HOUSEHOLD INCOME

Case No.

Commonwealth of Virginia

VA. CODE §§ 8.01-512.4, 34-4.2

..... General District Court
COURT NAME

Having been duly sworn, I,, depose and state the following to be true, accurate and complete:
NAME OF DEBTOR

1. I support dependent children, whose names and ages are as follows. For each child I have included the amount of monthly child support I receive (including voluntary support payments and payments made pursuant to a court or administrative order), and, if the child is employed or has other income, the amount of the child's gross monthly income. (If you receive no support for the child and the child has no income, insert zero.)

Full legal name of child	Age	Child's gross monthly support and income
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.....

[] Continued on attached sheet.

2. My personal gross monthly income, not including any of the above amounts, is \$

3. The following are the names and gross monthly incomes of all people who reside with me in the same house, apartment or other dwelling, other than the above-named dependent minor child or children. (If the household resident has no income, insert zero.)

Full legal name of household residents	Gross monthly income
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.....

[] Continued on attached sheet.

4. I swear or affirm that no person other than the above-named individuals resides with me and that I reside with no person other than the above-named individuals.

.....
DATE

.....
SIGNATURE OF DEBTOR

FOR NOTARY PUBLIC'S USE ONLY:

State of [] City [] County of

Acknowledged, subscribed and sworn to before me this day of, 20

.....
NOTARY REGISTRATION NUMBER

.....
NOTARY PUBLIC
(My commission expires:)