# INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.902(b) FAMILY LAW FINANCIAL AFFIDAVIT (SHORT FORM) (11/20)

## When should this form be used?

This form should be used when you are involved in a family law case which requires a **financial affidavit** and your individual gross income is UNDER \$50,000 per year unless:

- (1) You are filing a simplified dissolution of marriage under rule 12.105 and both parties have waived the filing of a financial affidavit;
- (2) You have no minor children, no support issues, and have filed a written settlement agreement disposing of all financial issues; or
- (3) The court lacks jurisdiction to determine any financial issues.

This form should be typed or printed in black ink. You should <u>file</u> this document with the <u>clerk of the</u> <u>circuit court</u> in the county where the <u>petition</u> was filed and keep a copy for your records.

### What should I do next?

A copy of this form must be filed with the court and served on the other party or his or her attorney in your case within 45 days of being served with the petition, if it is not served on him or her with your initial papers. The copy you are serving to the other party must be either mailed, e-mailed, or hand-delivered to the opposing party or his or her attorney on the same day indicated on the certificate of service. If it is mailed, it must be postmarked on the date indicated in the certificate of service. Service must be in accordance with Florida Rule of Judicial Administration 2.516.

### IMPORTANT INFORMATION REGARDING E-FILING

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. The rules and procedures should be carefully read and followed.

# IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. You must strictly comply with the format requirements set forth in the Florida Rules of Judicial Administration. If you elect to participate in electronic service, which means serving or receiving

Instructions for Florida Family Law Rules of Procedure Form 12.902(b), Family Law Financial Affidavit (Short Form) (11/20)

pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you must review Florida Rule of Judicial Administration 2.516. You may find this rule at www.flcourts.org through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

**SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO.** If a self-represented litigant elects to serve and receive documents by email, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the Designation of Current Mailing and E-mail Address, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please CAREFULLY read the rules and instructions for: Certificate of Service (General), Florida Supreme Court Approved Family Law Form 12.914; Designation of Current Mailing and E-mail Address, Florida Supreme Court Approved Family Law Form 12.915; and Florida Rule of Judicial Administration 2.516.

### Where can I look for more information?

**Before proceeding, you should read "General Information for Self-Represented Litigants" found at the beginning of these forms.** The words that are in "**bold underline**" in these instructions are defined there. For further information, see Florida Family Law Rule of Procedure 12.285.

# Special notes...

If you want to keep your address confidential because you have been found by a judge to be the victim of sexual battery, aggravated child abuse, aggravated stalking, harassment, aggravated battery, or domestic violence, do not enter the address, telephone, and fax information at the bottom of this form. Instead, file **Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(h).

The affidavit must be completed using **monthly** income and expense amounts. If you are paid or your bills are due on a schedule which is not monthly, you must convert those amounts. Hints are provided below for making these conversions.

**Hourly** - If you are paid by the hour, you may convert your income to monthly as follows:

Hourly amount	X	Hours worked per week	=	Weekly amount
Weekly amount	X	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	<b>Monthly Amount</b>
Daily - If you are paid b	y the da	y, you may convert your i	ncome	to monthly as follows:
Daily amount	Х	Days worked per week	=	Weekly amount
Weekly amount	Х	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	Monthly Amount
Weekly - If you are paid	by the	week, you may convert ye	our inco	ome to monthly as follows:
Weekly amount	Х	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	<b>Monthly Amount</b>

Instructions for Florida Family Law Rules of Procedure Form 12.902(b), Family Law Financial Affidavit (Short Form) (11/20)

Bi-weekly - If you are paid every two weeks, you may convert your income to monthly as follows:

Bi-weekly amount x 26 = Yearly amount Yearly amount ÷ 12 Months per year = **Monthly Amount** 

**Semi-monthly** - If you are paid twice per month, you may convert your income to monthly as follows:

Semi-monthly amount x 2 = Monthly Amount

Expenses may be converted in the same manner.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE	JUDICIAL CIRCUIT, COUNTY, FLORIDA
<u></u>	
	Case No.: Division:
Petitioner, and	
, Respondent.	
	AFFIDAVIT (SHORT FORM)
(Under \$50,000 Individ	dual Gross Annual Income)
I, {full legal name} information is true:	, being sworn, certify that the following
	Employed by:
Business Address:	
	very other week ( ) twice a month ( ) monthly
Check here if unemployed and explain on a se	parate sheet your efforts to find employment.
	ions with this form to figure out money amounts for paper, if needed. Items included under "other" should
1. \$ Monthly gross salary or wages	
2 Monthly bonuses, commissions, allow	vances, overtime, tips, and similar payments
· · · · · · · · · · · · · · · · · · ·	es such as self-employment, partnerships, close entracts (gross receipts minus ordinary and necessary e) (Attach sheet itemizing such income and expenses.)
4 Monthly disability benefits/SSI	
5 Monthly Workers' Compensation	
6 Monthly Unemployment Compensati	ion
7 Monthly pension, retirement, or annual	uity payments
8 Monthly Social Security benefits	
9 Monthly alimony actually received (A	idd 9a and 9b)
9a. From this case: \$	
9b. From other case(s): \$	
10 Monthly interest and dividends	
11. Monthly rental income (gross receipt	s minus ordinary and necessary expenses

Florida Family Law Rules of Procedure Form 12.902(b), Family Law Financial Affidavit (Short Form) (11/20)

		required to produce income) (Attach sheet itemizing such income and expense items.
12.		Monthly income from royalties, trusts, or estates
13.		Monthly reimbursed expenses and in-kind payments to the extent that they reduce personal living expenses
14.		Monthly gains derived from dealing in property (not including nonrecurring gains)
15.		Any other income of a recurring nature (list source)
16.		
17.	\$_	TOTAL PRESENT MONTHLY GROSS INCOME (Add lines 1–16)
PRE	ESEI	NT MONTHLY DEDUCTIONS:
18.	\$_	Monthly federal, state, and local income tax (corrected for filing status and allowable dependents and income tax liabilities)
	a.	Filing Status
	b.	Number of dependents claimed
19.		Monthly FICA or self-employment taxes
20.		Monthly Medicare payments
21.		Monthly mandatory union dues
22.		Monthly mandatory retirement payments
23.		Monthly health insurance payments (including dental insurance), excluding portion paid for any minor children of this relationship
24.		Monthly court-ordered child support actually paid for children from another relationship
25.		Monthly court-ordered alimony actually paid (Add 25a and 25b)
		25a. from this case: \$
		25b. from other case(s): \$
26.	\$_	TOTAL DEDUCTIONS ALLOWABLE UNDER SECTION 61.30, FLORIDA STATUTES
		(Add lines 18 through 25)
27.	Ś	PRESENT NET MONTHLY INCOME (Subtract line 26 from line 17)

# **SECTION II. AVERAGE MONTHLY EXPENSES**

**Proposed/Estimated Expenses.** If this is a dissolution of marriage case **and** your expenses as listed below do not reflect what you actually pay currently, you should write "estimate" next to each amount that is estimated.

A. HOUSEHOLD:			
Mortgage or rent	§	E. OTHER EXPENSES NOT LISTE	D ABOVE
Property taxes	<u>\$</u>	Clothing	\$
Utilities	<u>\$</u>	Medical/Dental (uninsured)	\$
Telephone	\$	Grooming	\$
Food	Ş	Entertainment	\$
Meals outside home	\$	Gifts	\$
Maintenance/Repairs	\$	Religious organizations	\$
Other:	\$	Miscellaneous	\$
		Other:	\$
B. AUTOMOBILE			\$
Gasoline	\$		\$
Repairs	\$		\$
Insurance	\$		\$
C CHILD/DENI/C EVDENICEC			\$
C. CHILD(REN)'S EXPENSES	<u>^</u>		
Day care	Ş		
Lunch money	<u>&gt;</u>	F. PAYMENTS TO CREDITORS	
Clothing	<u>}</u>	CREDITOR:	MONTHLY
Grooming	<u>&gt;</u>		PAYMENT
Gifts for holidays	\$		\$
Medical/Dental (uninsured)	\$		\$
Other:	\$		\$
			\$
D. INSURANCE			\$
Medical/Dental (if not listed on			\$
lines 23 or 45)	\$		\$
Child(ren)'s medical/dental	\$		\$
Life	\$		\$
Other:	\$		\$
			Ś

28. <b>\$</b>	_ TOTAL MONTHLY EXPENSES (add ALL monthly amounts in A through F above)
SUMMARY	
29. <b>\$</b> _	_ TOTAL PRESENT MONTHLY NET INCOME (from line 27 of SECTION I. INCOME)
30. <b>\$</b> _	_TOTAL MONTHLY EXPENSES (from line 28 above)
31. \$	SURPLUS (If line 29 is more than line 30, subtract line 30 from line 29. This is the amount of your surplus. Enter that amount here.)
32. <b>(\$</b>	_) (DEFICIT) (If line 30 is more than line 29, subtract line 29 from line 30. This is the amount of your deficit. Enter that amount here.)

### **SECTION III. ASSETS AND LIABILITIES**

Use the nonmarital column only if this is a petition for dissolution of marriage and you believe an item is "nonmarital," meaning it belongs to only one of you and should not be divided. You should indicate to whom you believe the item(s) or debt belongs. (Typically, you will only use this column if property/debt was owned/owed by one spouse before the marriage. See the "General Information for Self-Represented Litigants" found at the beginning of these forms and section 61.075(1), Florida Statutes, for definitions of "marital" and "nonmarital" assets and liabilities.)

## A. ASSETS:

DESCRIPTION OF ITEM(S). List a description of each separate item owned by you (and/or your spouse, if this is a petition	Current Fair	Nonm (check corre	
item owned by you (and/or your spouse, if this is a petition for dissolution of marriage). LIST ONLY LAST 4 DIGITS OF ACCOUNT NUMBERS. Check the line next to any asset(s) which you are requesting the judge award to you.	Market Value	Petitioner	Respondent
Cash (on hand)	\$		
Cash (in banks or credit unions)			
Stocks, Bonds, Notes			
Real estate: (Home)			
(Other)			
Automobiles			
Other personal property			
Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)			
Other			
Check here if additional pages are attached.			
Total Assets (add next column)	\$		

# **B. LIABILITIES:**

DESCRIPTION OF ITEM(S). List a description of each separate debt owed by you (and/or your spouse, if this is a petition for dissolution of marriage). LIST ONLY LAST 4 DIGITS OF ACCOUNT NUMBERS. Check the line next to any debt(s) for		Nonmarital (check correct column)	
ACCOUNT NUMBERS. Check the line next to any debt(s) for which you believe you should be responsible.	Owed	Petitioner	Respondent
Mortgages on real estate: First mortgage on home	\$		
Second mortgage on home			
Other mortgages			
Auto loans			
Charge/credit card accounts			
Other			
Check here if additional pages are attached.			
Total Debts (add next column)	\$		

# **C. CONTINGENT ASSETS AND LIABILITIES:**

INSTRUCTIONS: If you have any **POSSIBLE assets** (income potential, accrued vacation or sick leave, bonus, inheritance, etc.) or **POSSIBLE liabilities** (possible lawsuits, future unpaid taxes, contingent tax liabilities, debts assumed by another), you must list them here.

Contingent Assets	Possible	Nonmarital (check correct column)		
Check the line next to any contingent asset(s) which you are requesting the judge award to you.	Value	Petitioner	Respondent	
	\$			
Total Contingent Assets	\$			

Contingent Liabilities	Possible		marital rect column)
Check the line next to any contingent debt(s) for which you believe you should be responsible.	Amount Owed	Petitioner	Respondent
	\$		
Total Contingent Liabilities	\$		

# SECTION IV. CHILD SUPPORT GUIDELINES WORKSHEET

(Florida Family Law Rules of Procedure Form 12.902(e), Child Support Guidelines Worksheet, MUST be filed with the court at or prior to a hearing to establish or modify child support. This requirement cannot be waived by the parties.)

I certify that a copy of					
( ) hand delivered to	tne person(s) ii	sted below on {a	ατε}		·
Other party or his/her					
Name:					
Address:					
City, State, Zip: Telephone Number:					
Fax Number:					
E-mail Address(es):		<del></del> -			
( /					
Dated:		Printed Addres City, Sta Telepho Fax Nui	re of Party Name:s: ate, Zip: one Number: mber: Address(es):		
<b>IF A NONLAWYER HEL</b> [fill in <b>all</b> blanks] This f This form was complet {name of individual} _	PED YOU FILL O orm was prepare ed with the assi	Printed Address City, Sta Telepho Fax Nun E-mail A UT THIS FORM, H ed for the: {choos stance of:	Name:s:s:s:s:s:site, Zip:site, Zip:si	L <b>IN THE BLAN</b> Petitioner ( )	<b>KS BELOW:</b> Respondent
<b>IF A NONLAWYER HEL</b> [fill in <b>all</b> blanks] This f This form was complet	<b>PED YOU FILL O</b> lorm was prepare ed with the assi	Printed Address City, Sta Telepho Fax Nui E-mail <i>i</i> E-mail <i>i</i> UT THIS FORM, Hed for the: {choos stance of:	Name:s:s:s:s:s:site, Zip:site, Zip:si	L <b>IN THE BLAN</b> Petitioner ( )	KS BELOW: Respondent