



IN THE CIRCUIT COURT OF _____ COUNTY, MISSOURI

Judge or Division:	Case Number:	
In RE the Marriage of : Petitioner:		
SSN (last four digits):		vs.
Respondent:		
SSN (last four digits):		

(Date File Stamp)

Income and Expense Statement of _____

I. My Income	
A. Gross wages or salary and commissions <u>paid to me</u> each pay period: _____>	
Paid: Weekly _____ Bi-Weekly _____ Semi-Monthly _____ Monthly _____	
B. My monthly gross wages or salary: _____>	
C. My tax status claimed: Single _____ Married _____ Head/Household _____ Number of persons claimed as deductions _____	
D. Payroll deductions each pay period:	
FICA (social security tax)	
Federal withholding tax	
State withholding tax	
City earning tax	
Union dues	
Health insurance	
Others: (specify)	
My total deductions each pay period: _____>	
My net take home pay each pay period: _____>	
E. My take home or net pay each month: _____>	
Source	Amount
F. My total monthly average gross additional income from all sources _____>	
G. My total monthly gross income from wages (line B) and additional income (line F) _____>	
H. Total gross income from my tax returns for each of the last 3 calendar years:	
Year	Income

II. My Spouse's Current Estimated Monthly Gross Income

Source	Amount
Total _____ →	

III. My Anticipated Expenses (Monthly Average – Itemize)

A. Rent or mortgage payments (include home association dues)		
B. Maintenance & repairs of residence		
C. Utilities		
1. Gas		
2. Water		
3. Electricity		
4. Telephone		
5. Trash Service		
6. Other		
Total Utility Expense _____ →		
D. Automobiles		
1. Gas and oil		
2. Maintenance		
3. Tax and license		
4. Payment of Loan		
5. Other		
Total Automobile Expense _____ →		
E. Insurance		
1. Life		
2. Health, accident & dental		
3. Disability		
4. Homeowners (if not in mortgage payment)		
5. Automobile		
6. Other		
Total Insurance Expense _____ →		
F. Taxes		
1. Real estate (if not in mortgage payment)		
2. Personal property		
3. Automobile		
4. Other		
Total Tax Expense _____ →		
G. Payments I make on debts		
H. Child support I pay to others for children not in my custody and not involved in this proceeding		
I. Maintenance or alimony paid by me to persons other than my current spouse		
J. Church and charitable contributions		

K. Other Living Expenses	Mine	Children in my Custody	Children in Spouse's Custody	Children in Joint Custody	
1. Food					
2. Clothing					
3. Medical care					
4. Prescription drugs					
5. Dental care					
6. Recreation					
7. Laundry and cleaning					
8. Barber and beauty shop					
9. School and books					
10. School lunches					
11. Lessons					
12. Home maintenance					
13. Other (itemize)					
Total other living expenses (total each column) →					
L. Day care or babysitter					
1. Work related					
2. Non-work related					
Total day care/babsitter expenses (total each column) →					
M. All other expenses not already identified (express as monthly average)					
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
10.					
11.					
12.					
13.					
14.					
15.					
Total all other expenses not already identified →					
Total average monthly expenses →					

