INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.902(c) FAMILY LAW FINANCIAL AFFIDAVIT (LONG FORM) (10/21)

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 $50,000 OR MORE per year** unless:

(1) You are filing a simplified dissolution of marriage under rule 12.105 and both parties have waived the filing of financial affidavits;
(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. After completing this form, you should sign the form. You should then **file** this document with the **clerk of the circuit court** in the county where the **petition** was filed and keep a copy for your records.

What should I do next?

A copy of this form must be served on the other **party** 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. **Service** must be in accordance with Florida Rule of General Practice and Judicial Administration 2.516.

A copy of this form must be filed with the court and served on the other party or his or her attorney. 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.

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.

IMPORTANT INFORMATION REGARDING E-FILING

The Florida Rules of General Practice and 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 General Practice and 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 General Practice and 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 General Practice and Judicial Administration**. If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you must review Florida Rule of General Practice and Judicial Administration 2.516. You may find this rule at www.flcourts.org through the link to the Rules of General Practice and 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 General Practice and Judicial Administration 2.516.

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	=	**Monthly Amount**

Daily - If you are paid by the day, you may convert your income to monthly as follows:

Daily amount	x	Days worked per week	=	Weekly amount
Weekly amount	x	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 your income to monthly as follows:

Weekly amount	x	52 Weeks per year	=	Yearly amount
Yearly amount	÷	12 Months per year	=	**Monthly Amount**

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,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____
Division: _____

_____,
Petitioner,

and

_____,
Respondent.

FAMILY LAW FINANCIAL AFFIDAVIT (LONG FORM)

($50,000 or more Individual Gross Annual Income)

I, *{full legal name}* _____, being sworn, certify that the following information is true:

SECTION I. INCOME

1. My age is: _____
2. My occupation is: _____
3. I am currently

   *[Check **all** that apply]*

   a. _____ Unemployed

   Describe your efforts to find employment, how soon you expect to be employed, and the pay you expect to receive: _____
   _____

   b. _____ Employed by: _____

   Address: _____

   City, State, Zip code: _____ Telephone Number: _____

   Pay rate: $ _____ ( ) every week ( ) every other week ( ) twice a month

   ( ) monthly ( ) other: _____

   If you are expecting to become unemployed or change jobs soon, describe the change you expect and why and how it will affect your income: _____
   _____
   _____.

   _____Check here if you currently have more than one job. List the information above for the second job(s) on a separate sheet and attach it to this affidavit.

c. _____ Retired. Date of retirement: _____

Employer from whom retired: _____

Address: _____

City, State, Zip code: _____ Telephone Number: _____

LAST YEAR'S GROSS INCOME:	Your Income	Other Party's Income *(if known)*
YEAR _____	$ _____	$ _____

PRESENT MONTHLY GROSS INCOME:

All amounts must be MONTHLY. See the instructions with this form to figure out money amounts for anything that is NOT paid monthly. Attach more paper, if needed. Items included under "other" should be listed separately with separate dollar amounts.

1. $_____ Monthly gross salary or wages
2. _____ Monthly bonuses, commissions, allowances, overtime, tips, and similar payments
3. _____ Monthly business income from sources such as self-employment, partnerships, close corporations, and/or independent contracts (Gross receipts minus ordinary and necessary expenses required to produce income.)(Attach sheet itemizing such income and expenses.)
4. _____ Monthly disability benefits/SSI
5. _____ Monthly Workers' Compensation
6. _____ Monthly Unemployment Compensation
7. _____ Monthly pension, retirement, or annuity payments
8. _____ Monthly Social Security benefits
9. _____ Monthly alimony actually received (Add 9a and 9b)
   9a. From this case: $_____
   9b. From other case(s): $_____
10. _____ Monthly interest and dividends
11. _____ Monthly rental income (gross receipts minus ordinary and necessary expenses required to produce income) (Attach sheet itemizing such income and expense items.)
12. _____ Monthly income from royalties, trusts, or estates
13. _____ Monthly reimbursed expenses and in-kind payments to the extent that they reduce personal living expenses (Attach sheet itemizing each item and amount.)
14. _____ Monthly gains derived from dealing in property (not including nonrecurring gains)
    _____ Any other income of a recurring nature (identify source):
15. _____
16. _____
17. **$_____ TOTAL PRESENT MONTHLY GROSS INCOME** (Add lines 1 through 16.)

PRESENT MONTHLY DEDUCTIONS:

All amounts must be MONTHLY. See the instructions with this form to figure out money amounts for anything that is NOT paid monthly.

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. **$_____ 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.

HOUSEHOLD:

1. $_____ Monthly mortgage or rent payments
2. _____ Monthly property taxes (if not included in mortgage)
3. _____ Monthly insurance on residence (if not included in mortgage)
4. _____ Monthly condominium maintenance fees and homeowner's association fees
5. _____ Monthly electricity
6. _____ Monthly water, garbage, and sewer
7. _____ Monthly telephone
8. _____ Monthly fuel oil or natural gas
9. _____ Monthly repairs and maintenance
10. _____ Monthly lawn care
11. _____ Monthly pool maintenance
12. _____ Monthly pest control
13. _____ Monthly misc. household
14. _____ Monthly food and home supplies
15. _____ Monthly meals outside home
16. _____ Monthly cable t.v.
17. _____ Monthly alarm service contract
18. _____ Monthly service contracts on appliances
19. _____ Monthly maid service

Other:

20. _____
21. _____
22. _____
23. _____
24. _____
25. **$_____ SUBTOTAL** (Add lines 1 through 24.)

AUTOMOBILE:

26. $_____ Monthly gasoline and oil
27. _____ Monthly repairs
28. _____ Monthly auto tags and emission testing
29. _____ Monthly insurance
30. _____ Monthly payments (lease or financing)
31. _____ Monthly rental/replacements
32. _____ Monthly alternative transportation (bus, rail, car pool, etc.)
33. _____ Monthly tolls and parking
34. _____ Other: _____
35. **$_____ SUBTOTAL** (Add lines 26 through 34.)

MONTHLY EXPENSES FOR CHILDREN COMMON TO BOTH PARTIES:

36. $_____ Monthly nursery, babysitting, or day care
37. _____ Monthly school tuition
38. _____ Monthly school supplies, books, and fees
39. _____ Monthly after school activities
40. _____ Monthly lunch money
41. _____ Monthly private lessons or tutoring
42. _____ Monthly allowances
43. _____ Monthly clothing and uniforms
44. _____ Monthly entertainment (movies, parties, etc.)
45. _____ Monthly health insurance
46. _____ Monthly medical, dental, prescriptions (nonreimbursed only)
47. _____ Monthly psychiatric/psychological/counselor
48. _____ Monthly orthodontic
49. _____ Monthly vitamins
50. _____ Monthly beauty parlor/barber shop
51. _____ Monthly nonprescription medication
52. _____ Monthly cosmetics, toiletries, and sundries
53. _____ Monthly gifts from child(ren) to others (other children, relatives, teachers, etc.)
54. _____ Monthly camp or summer activities
55. _____ Monthly clubs (Boy/Girl Scouts, etc.)
56. _____ Monthly time-sharing expenses
57. _____ Monthly miscellaneous
58. **$_____ SUBTOTAL** (Add lines 36 through 57.)

MONTHLY EXPENSES FOR CHILD(REN) FROM ANOTHER RELATIONSHIP
(other than court-ordered child support)

59. $_____
60. _____
61. _____
62. _____
63. **$_____ SUBTOTAL** (Add lines 59 through 62.)

MONTHLY INSURANCE:

64. $_____ Health insurance (if not listed on lines 23 or 45)
65. _____ Life insurance
66. _____ Dental insurance.

Other:

67._____
68._____
69. **$_____ SUBTOTAL** (Add lines 66 through 68, exclude lines 64 and 65.)

OTHER MONTHLY EXPENSES NOT LISTED ABOVE:

70. $_____ Monthly dry cleaning and laundry
71. _____Monthly clothing
72. _____ Monthly medical, dental, and prescription (unreimbursed only)
73. _____ Monthly psychiatric, psychological, or counselor (unreimbursed only)
74. _____ Monthly non-prescription medications, cosmetics, toiletries, and sundries
75. _____ Monthly grooming
76._____ Monthly gifts
77._____ Monthly pet expenses
78._____ Monthly club dues and membership
79._____ Monthly sports and hobbies
80._____ Monthly entertainment
81._____ Monthly periodicals/books/tapes/CDs
82._____ Monthly vacations
83._____ Monthly religious organizations
84._____ Monthly bank charges/credit card fees
85._____ Monthly education expenses
86._____ Other: (include any usual and customary expenses not otherwise mentioned in the items listed above)_____
87._____
88._____
89._____
90**. $_____ SUBTOTAL** (Add lines 70 through 89.)

MONTHLY PAYMENTS TO CREDITORS: (only when payments are currently made by you on outstanding balances). List only last 4 digits of account numbers.

MONTHLY PAYMENT AND NAME OF CREDITOR(s):

91. $_____
92._____
93._____
94._____
95._____
96._____
97._____
98._____
99._____
100._____
101._____

102._____
103._____
104**. $_____ SUBTOTAL** (Add lines 91 through 103.)
105**. $_____ TOTAL MONTHLY EXPENSES:**
(Add lines 25, 35, 58, 63, 69, 90, and 104 of Section II, Expenses.)

SUMMARY
106**. $_____ TOTAL PRESENT MONTHLY NET INCOME** (from line 27 of SECTION I. INCOME)

107**. $_____ TOTAL MONTHLY EXPENSES** (from line 105 above)

108**. $_____ SURPLUS** (If line 106 is more than line 107, subtract line 107 from line 106. This is the amount of your surplus. Enter that amount here.)

109**. ($_____) (DEFICIT)** (If line 107 is more than line 106, subtract line 106 from line 107. This is the amount of your deficit. Enter that amount here.)

SECTION III. ASSETS AND LIABILITIES

A. ASSETS (This is where you list what you OWN.)

INSTRUCTIONS:

STEP 1: In column A, list a description of each separate item owned by you (and/or your spouse, if this is a petition for dissolution of marriage). Blank spaces are provided if you need to list more than one of an item.

STEP 2: If this is a petition for dissolution of marriage, check the line **in Column A** next to any item that you are requesting the judge award to you.

STEP 3: In column B, write what you believe to be the current fair market value of all items listed.

STEP 4: Use column C 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 belongs. (Typically, you will only use Column C if property was owned 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 ONLY LAST FOUR DIGITS OF ACCOUNT NUMBERS. Check the line next to any asset(s) which you are requesting the judge award to you.	B Current Fair Market Value	C Nonmarital (Check correct column)	
			Petitioner	Respondent
	Cash (on hand)	$		
	Cash (in banks or credit unions)			
	Stocks/Bonds			
	Notes (money owed to you in writing)			
	Money owed to you (not evidenced by a note)			
	Real estate: (Home)			
	(Other)			
	Business interests			
	Automobiles			
	Boats			

	Other vehicles			
	Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)			
	Furniture & furnishings in home			
	Furniture & furnishings elsewhere			
	Collectibles			
	Jewelry			
	Life insurance (cash surrender value)			
	Sporting and entertainment (T.V., stereo, etc.) equipment			
	Other assets:			
Total Assets (add column B)		$		

B. LIABILITIES/DEBTS (This is where you list what you OWE.)

INSTRUCTIONS:

STEP 1: In column A, list a description of each separate debt owed by you (and/or your spouse, if this is a petition for dissolution of marriage). Blank spaces are provided if you need to list more than one of an item.

STEP 2: If this is a petition for dissolution of marriage, check the line **in Column A** next to any debt(s) for which you believe you should be responsible.

STEP 3: In column B, write what you believe to be the current amount owed for all items listed.

STEP 4: Use column C only if this is a petition for dissolution of marriage and you believe an item is "nonmarital," meaning the debt belongs to only one of you and should not be divided. You should indicate to whom you believe the debt belongs. (Typically, you will only use Column C if the debt was 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 LIABILITIES: DESCRIPTION OF ITEM(S) LIST ONLY LAST FOUR DIGITS OF ACCOUNT NUMBERS. Check the line next to any debt(s) for which you believe you should be responsible.	B Current Amount Owed	C Nonmarital (Check correct column)	
			Petitioner	Respondent
	Mortgages on real estate: First mortgage on home	$		
	Second mortgage on home			
	Other mortgages			
	Charge/credit card accounts			
	Auto loan			
	Auto loan			
	Bank/Credit Union loans			
	Money you owe (not evidenced by a note)			
	Judgments			
	Other:			
Total Debts (add column B)		**$**		

C. NET WORTH (excluding contingent assets and liabilities)

$_____Total Assets (enter total of Column B in Asset Table; Section A)
$_____Total Liabilities (enter total of Column B in Liabilities Table; Section B)
$_____TOTAL NET WORTH (Total Assets minus Total Liabilities)
(excluding contingent assets and liabilities)

D. 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.

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

A **Contingent Liabilities** **Check the line next to any contingent debt(s) for which you believe you should be responsible.**		**B** **Possible Amount Owed**	**C** **Nonmarital** **(Check correct column)**	
			Petitioner	Respondent
☐		$	☐	☐
☐			☐	☐
☐			☐	☐
☐			☐	☐
☐			☐	☐
Total Contingent Liabilities		**$**		

E. 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.

[Check **one** only]

____ **A Child Support Guidelines Worksheet IS or WILL BE filed in this case.** This case involves the establishment or modification of child support.

____ **A Child Support Guidelines Worksheet IS NOT being filed in this case.** The establishment or modification of child support is not an issue in this case.

I certify that a copy of this financial affidavit was [check all used]: (__) e-mailed (__) mailed, (__) faxed (__) hand delivered to the person(s) listed below on *{date}* _____.

Other party or his/her attorney:
Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____
E-mail Address(es): _____

Under penalties of perjury, I declare that I have read this document and the facts stated in it are true.

Dated: _____

_____
Signature of Party
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____
E-mail Address(es): _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:
[fill in **all** blanks] This form was prepared for the: *{choose only **one**}* (__) Petitioner (__) Respondent
This form was completed with the assistance of:
{name of individual} _____,
{name of business} _____,
{address} _____,
{city} _____, *{state}* _____, *{telephone number}* _____.