

**IN THE DISTRICT COURT IN AND FOR TULSA COUNTY
STATE OF OKLAHOMA**

NAME)	
)	
Petitioner,)	Case No. _____
)	
vs.)	Judge _____
)	
NAME,)	
)	
Respondent.)	

TEMPORARY ORDER FINANCIAL DECLARATION

Name: _____	—	Petitioner
Address: _____	—	Respondent

Employer: _____

INCOME:

Salary and Wages: (if paid weekly multiply by 4.3 to get monthly income; if paid every other week multiply by 2.15): (Please attach copies of pay check stubs for the last three months.)	\$ _____
Pension or Retirement:	\$ _____
Social Security:	\$ _____
Disability and Unemployment:	\$ _____
Public Assistance (monthly payments only):	\$ _____
Support from Previous Marriage:	\$ _____
Rental Income:	\$ _____
Any other sources of regular income (dividends, oil royalties, interest, etc.)	\$ _____

DEDUCTIONS FROM INCOME:

Federal Taxes (Please attach copy of most recent federal tax return.):	\$ _____
State Taxes:	\$ _____
Social Security:	\$ _____
Medicare:	\$ _____
Other: (specify)	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total Net Income: \$ _____

EXPENSES: Monthly recurring expenses – List names of all people for whom these expenses are incurred:

Rent or mortgage (list actual expenses at time of hearing):	\$ _____
Food and Household Supplies:	\$ _____
Utilities (Water, Electricity and Gas; average over last 2 months):	\$ _____
Telephone:	\$ _____
Laundry and Cleaning:	\$ _____
Clothing:	\$ _____
Medical (only amounts NOT covered by insurance):	\$ _____
Dental (only amounts NOT covered by insurance):	\$ _____
Insurance (Specify type & premiums paid monthly):	\$ _____
_____	\$ _____
_____	\$ _____
Child Care, Children (state number of children ____):	\$ _____
Payments of alimony or child support (only include if currently paying):	\$ _____
Children's School Expenses:	\$ _____
Entertainment:	\$ _____
Auto payment	\$ _____
Auto Expenses (gas, oil):	\$ _____
Installment Payments (charge cards, department stores, etc.):	\$ _____

Total Expenses: \$ _____

Known expenses becoming due in next 90 days (insurance, car tags, demand notes, taxes, etc.)

\$ _____
\$ _____

SUMMARY:

Net monthly income	\$ _____
Less expenses	\$ _____
Balance	\$ _____

ATTACH COPIES OF PAY CHECK STUBS FOR LAST 3 MONTHS AND COPY OF MOST RECENT FEDERAL TAX RETURN