

STATE OF HAWAII
FAMILY COURT
THIRD CIRCUIT

INCOME AND EXPENSE STATEMENT

Plaintiff Defendant

CASE NUMBER

FC-D NO.

PLAINTIFF
(Full Name)

VS.

DEFENDANT
(Full Name)

This document is prepared by

Plaintiff Defendant Atty. for Plaintiff Atty. for Defendant

Name _____
Address _____
City, State, Zip _____
Phone _____

Occupation: _____
Job title

Employer: _____

Address: _____

Length of service: _____ months/years.

Income Tax Withholding based on: _____ dependents.

INCOME

Gross income. Paid: monthly, 2 times per month, every 2 weeks, weekly or other _____

Gross per pay period \$ _____ Per month \$ _____

Payroll deductions per pay period:

Fed. income tax \$ _____
State income tax \$ _____
FICA (Social Security) \$ _____
Union dues \$ _____

a) Net per pay period \$ _____ Per month \$ _____

Other:

Retirement/401K \$ _____
Credit Union \$ _____
Direct Deposit \$ _____
Income Assignments \$ _____
Support Payments \$ _____
Medical Insurance \$ _____

b) Take home per pay period \$ _____ Per month \$ _____

Other regular monthly income, (rental income, 2nd job, interest, child support, welfare, food stamps, and any other source.)

Gross monthly receipt \$ _____
Taxes paid IRS and State on above \$ _____

c) Total other income net \$ _____

Total Monthly Income (Add per month income from lines a and c above) \$ _____

EXPENSES

Do not list expenses which are paid by payroll deduction.

Housing, expenses per month:

rent, mortgage, agreement of sale \$ _____
insurance if not included above \$ _____
Real Property taxes (if paid separately) \$ _____
Utilities, gas, water, elec., telephone etc. \$ _____

Transportation, expenses per month:

Car payment, lease, rental \$ _____
Insurance on vehicle \$ _____
Maintenance (repairs) \$ _____
Operating (gas, oil & tires) \$ _____

Total Housing and Transportation expenses \$ _____

Debt service (all monthly payments, eg. credit cards, charges, finance company, personal loans) \$ _____

Personal Expenses per month:

	Self	Children No.(_)
Food	\$ _____	\$ _____
Clothing	\$ _____	\$ _____
Medical and Dental	\$ _____	\$ _____
Laundry & Cleaning	\$ _____	\$ _____
Personal articles	\$ _____	\$ _____
Recreation (movies etc)	\$ _____	\$ _____
School (include food)	\$ _____	\$ _____
Household	\$ _____	\$ _____
Bus (on monthly basis)	\$ _____	\$ _____
Other (_____)	\$ _____	\$ _____
Payment to others for dependent care	\$ _____	\$ _____
 Sub Totals	 \$ _____	 \$ _____

Total Personal expenses \$ _____

Grand Total expenses: Housing, Trans., Debt & personal \$ _____

Savings, <Deficiency>: Income minus Expenses \$ _____

Explain in detail where savings are invested, or if there is a <deficiency>, who provides the funds to maintain the level of spending indicated in this income and expense statement. (Use separate sheet if more space is needed.)

CERTIFICATION

I hereby declare under the penalty of perjury that I have supplied the information used in this Income and Expense Statement and have reviewed this statement and I certify that the information is accurate, complete and correct.

DATE

PLAINTIFF'S DEFENDANT'S SIGNATURE

STATE OF HAWAI'I
FAMILY COURT
THIRD CIRCUIT

ASSET AND DEBT STATEMENT
 Plaintiff Defendant Both Parties

CASE NUMBER

FC-D NO.

PLAINTIFF
(Full Name)

VS.

DEFENDANT
(Full Name)

This document is prepared by

Plaintiff Defendant Atty. for Plaintiff Atty. for Defendant

Name _____

Address _____

City, State, Zip _____

Phone _____

1. Cash (on hand or held by others for me) \$ _____

2. CREDIT UNION ACCOUNTS:

<u>Name</u>	<u>Title (H,W,J)</u>	<u>Credit Balance</u>	<u>Debt Balance</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. BANK AND SAVINGS ACCOUNTS: (Include Trustee Accounts)

<u>Company & Branch</u>	<u>Type of Account</u>	<u>Title (H,W,J)</u>	<u>Current Balance</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. SECURITIES: (Stocks, Bonds, Mutual Funds, Certificates of Deposit, etc.)

<u>Company</u>	<u>Title (H,W,J)</u>	<u>Date of Acquisition</u>	<u>Cost</u>	<u>Market Value</u>	<u>Debt Owed Against</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

5. **VEHICLES:** (Autos, Trucks, Motorcycles, Trailers, Campers, Boats, etc.)

<u>Year</u>	<u>Make</u>	<u>Title (H,W,J)</u>	<u>Current Market Value</u>	<u>Debt Owed Against</u>

6. **REAL PROPERTY:**

<u>Address</u>	<u>Fee or Lease</u>	<u>Title (H,W,J)</u>	<u>Date of Acquisition</u>	<u>Cost</u>	<u>Current Gross Value</u>	<u>Total Debt Owed</u>

7. **LIFE INSURANCE:**

<u>Company</u>	<u>Person Insured</u>	<u>Face Amount</u>	<u>Beneficiary</u>	<u>Title (H,W,J)</u>	<u>Cash Value</u>	<u>Debt Owed Against</u>

8. **RETIREMENT; PENSION; PROFIT SHARING ACCOUNTS:**

<u>Employer or Company</u>	<u>Title (H,W,J)</u>	<u>Type of Plan</u>	<u>Years in Plan</u>	<u>Total Value</u>

9. **ALL OTHER MAJOR ASSETS:** (Furniture, Household Effects, Art, Stamps, Coins, Tools, Equipment, Jewelry, Accounts Receivable, Investment Assets, Business Assets, Cemetary Plots or Niches, Tax Refunds Due, etc.)

<u>General Description</u>	<u>Title (H,W,J)</u>	<u>Estimated Gross Value</u>	<u>Debt Owed Against</u>

10. PROPERTY HELD IN TRUST FOR OR BY THIRD PERSON/S: (Aside from Bank & Savings Accounts Noted in paragraph 3)

<u>Description</u>	<u>Trustee/s</u>	<u>Beneficiaries</u>	<u>Value</u>	<u>Debt Owed Against</u>

11. ALL OUTSTANDING DEBTS: (Include those listed parts in 2, 4, 5, 6, 7, 9, and 10 above, in addition to all credit cards, charges, finance companies, and personal loans.)

<u>Creditor</u>	<u>Debtor (H,W,J or Other)</u>	<u>Security</u>	<u>Mo./Yr. Debt Incurred</u>	<u>Total Balance Owed</u>	<u>Minimum Monthly Payment</u>

Total Debt in Wife's Name Alone: _____
 Total Debt in Husband's Name Alone: _____
 Total Debt in Joint Names: _____

CERTIFICATION

I hereby declare under the penalty of perjury that I have supplied the information used in this Asset and Debt Statement and have reviewed this statement and I certify that the information is accurate, complete and correct.

DATE	<input type="checkbox"/> PLAINTIFF'S <input type="checkbox"/> DEFENDANT'S SIGNATURE
DATE	<input type="checkbox"/> PLAINTIFF'S <input type="checkbox"/> DEFENDANT'S SIGNATURE

STATE OF HAWAI'I FAMILY COURT THIRD CIRCUIT	APPEARANCE AND WAIVER	CASE NUMBER FC-D NO.
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VS.	_____ PLAINTIFF (Full Name)
	_____ DEFENDANT (Full Name)

This document is prepared by

Plaintiff
 Defendant
 Atty. for Plaintiff
 Atty. for Defendant

Name

Address

City, State, Zip

Phone

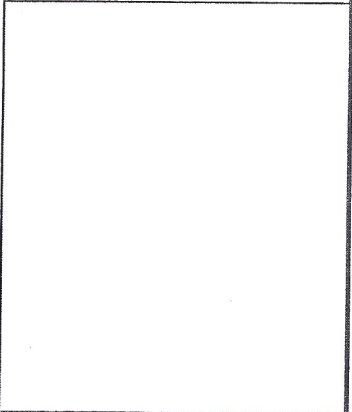
I, the Defendant, acknowledge receipt of a filed copy of the Complaint and Summons in the above-entitled action, submit myself to the Court's jurisdiction, and have agreed with the Plaintiff on the matters set forth in

- a signed agreement incident to divorce.
- a form of Decree which I have approved by signature.

I consent to a hearing of the complaint by a judge at any time without further notice and without my presence so long as the Decree issued incorporates the provisions I have approved. If such Decree is not entered by the Court, I request to be notified.

I understand that I am not required to sign this paper and that by doing so I am permitting the Court without opposition from me to proceed with the above-entitled matter at this time unless there is reason for the Court to alter our agreement.

- I am not in the military service of the United States.
- I am in the military service of the United States, but I do not request a stay of proceedings herein, and I do waive any rights I may have under the Soldiers' and Sailors' Civil Relief Act, 50 U.S.C. Sec. 521, et. seq.



DATE

DEFENDANT'S SIGNATURE