

CITY OF EAST POINT MUNICIPAL COURT FINANCIAL AFFIDAVIT

You are required to complete this form legibly and completely. WARNING: YOU MAY BE PROSECUTED FOR SUBMITTING FALSE INFORMATION IN THIS AFFIDAVIT TO THE COURT.

Name:		Nickname, Maiden Name, Alias, A.K.A.:	
Date of Birth:		SSN:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Address:		How long at this address? Years _____ Months _____	
Previous Address (If you have been at your current address less than 2 years):			
Home Telephone Number:		Cellular Phone Number:	
Driver's License or I.D. Number:	State:	Expiration Date:	
Marital Status (Check One): <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced	Number of persons in Household (Check all that apply): <input type="checkbox"/> Spouse <input type="checkbox"/> Children 13 years of age or older <input type="checkbox"/> Children under the age of 13 <input type="checkbox"/> Other (please specify) _____		
Employer (Company Name):		Phone Number:	How long Employed:
Position/ Job title:	Monthly Income: \$ _____	Next Pay Date:	
Supervisor's Name/ Title:		Supervisor's Phone Number:	
Spouse's Name (If Married):			
Spouse's Employer (Company Name): _____ Monthly Income: \$ _____			
Additional Income (to include all persons listed in household): \$ _____ per month / year (circle one) Source of Additional Household Income: _____			
Military Information (MILITARY ID REQUIRED IF YOU INDICATE YOU ARE IN THE MILITARY):			
Are you currently serving in the military? <input type="checkbox"/> Yes <input type="checkbox"/> No Branch of Service: _____ Military Unit: _____ Superior Officer's Name and Telephone Number: _____			

HOUSING INFORMATION (Documentation Required)	
Mortgage Company Name: _____	
Mortgage Due Date: _____	
Monthly Payment Amount: \$ _____	
Mortgage Arrearage (if Mortgage is past due): \$ _____	
OR	
Landlord Name: _____	
Rental Monthly Amount: \$ _____	
Rental Due Date: _____	
Rental Arrearage (if rent is past due): \$ _____	
ASSETS (E.G. HOUSE, VEHICLE, 401K)	
1.	_____
3.	_____
4.	_____
5.	_____
2.	_____
REFERENCES (WILL BE VERIFIED BY COURT STAFF)	
List two personal references (must have full names, complete addresses and telephone numbers):	
1.	_____
2.	_____
List two relatives (must have full names, complete addresses and telephone number):	
2.	_____
1.	_____

PERSONALLY appeared _____, defendant, who is a resident of _____ County, State of _____, and makes his/her statement and FINANCIAL AFFIDAVIT upon belief and personal knowledge that the above matters, facts, and things set forth are true and correct to the best of his/her knowledge. I authorize The City of East Point Municipal Court to make any necessary contacts to verify any statements made and information provided, and obtains any additional information required. I also give my permission to contact any credit reporting agency, review my credit report from any reporting agency, investigation agency or any other source.

I declare under penalty of perjury that the foregoing is true and correct.

Name (If a minor, signature of parent of legal guardian) _____ Date _____

Interviewer _____ Date _____

Judge _____ Date _____