IN TH	E CIRCUIT COURT OF			, MISSOURI
	(County where court is locat	ted. City of Saint L	Louis is considere	ed a county.)
(First Name)  Petitioner, (Ent	(Middle Name) (Last Name) ter full legal name of Petitioner above)	(Jr./Sr./III)	Case Number (Use number	on Petition)
v.				
(First Name) Respondent.	Division  (Middle Name) (Last Name) (Jr./Sr./III)  Respondent. (Enter full legal name of Respondent above)  Division  Number  (Use number on Pet		on Petition)	
Statement com	Statement of Incom (For use in Child Custod upleted by	ly and Sup $ \frac{1}{Name} = \frac{1}{(Last N)} $	port Cases	(Jr./Sr./III)
Monthly Inco	ome Information	F	Petitioner	Respondent
	ross income from salaries, wages and ons including bonuses			
2. Monthly se	elf-employment income			
	ocial security benefits not including ntal Security Income (SSI)			
4. Monthly re	etirement benefits			
5. Monthly pe	ension income			
6. Monthly in	terest income			
7. Monthly tru	ust and annuity income			

Monthly income from dividends and partnership

Monthly unemployment compensation benefits

8.

distributions

10. Monthly severance pay

Мо	nthly Income Information (Continued)	Petitioner	Respondent
14.	Monthly military allowances for subsistence and quarters		
15.	Total monthly gross income. Add paragraphs 1 through 14. (Form 14 - Line 1)		
16.	Monthly Supplemental Security Income benefits (SSI)		
17.	Monthly payments of Temporary Assistance for Needy Families (TANF)		
18.	Monthly Medicaid benefits		
19.	Monthly food stamps (SNAP)		
20.	Number of unemancipated children who are <b>not</b> the subject of this proceeding that primarily reside with each party (Form 14 - Line 2c(1))		
	Monthly amount of child support received pursuant to a court or administrative order for unemancipated children who are <b>not</b> the subject of this proceeding that primarily reside with each party (Form 14 - Line 2c(3))		
21.	Monthly maintenance received in <b>this</b> case		
22.	Monthly maintenance received in <b>other</b> cases		
23.	Total monthly court-ordered maintenance received. Add paragraphs 21 and 22. (Form 14 - Line 1a)		
Мо	nthly Expense Information		
24.	Monthly court- or administratively-ordered child support being paid for children who are <b>not</b> the subject of this proceeding (Form 14 - Line 2a)		
25.	Monthly Maintenance		
	a. Monthly maintenance paid in this case		
	b. Monthly maintenance paid in other cases		
	Total monthly court-ordered maintenance paid.  Add paragraphs 25a and 25b. (Form 14 - Line 2b)		
26.	Reasonable monthly work-related child care costs of each party for the children who are the subject of this proceeding (Form 14 - Line 6a and Line 6b)		
27.	Monthly health insurance costs for the children who are the subject of this proceeding (Form 14 - Line 6c)		

Мо	nthly Expense Information (Continued)	Petitioner	Respondent
28.	Monthly uninsured extraordinary medical costs for the children who are the subject of this proceeding (Form 14 - Line 6d)		
29.	Other monthly extraordinary child rearing costs for the children who are the subject of this proceeding (Form 14 - Line 6e)		
30.	All other monthly expenses of each person (Include housing costs, utilities, transportation costs, food, clothing, loan payments, charitable contributions, entertainment, insurance other than listed on line 27, etc.)		
31.	Total monthly expenses. Add paragraphs 24 through 30. (Do not include 25a and 25b. Use the total amounts from 25.)		

## **Proof of Service on Other Parties**

obtain service, you r facsimile (fax); or lea	may deliver the document by	to each of the other parties, or their attorney(s). To hand; send it by First Class U.S. mail, e-mail or y's attorney to be served with a clerk, receptionist oed.	
		(date) I have sent/given a copy of this <i>Statement and Support Cases)</i> to each of the following partie	
	Name	Address: U.S. mail/e-mail/fax number	
Expenses (For use in knowledge, information	n Child Custody and Suppo	rt Cases) are true according to his or her best  (Print your name above)	
	mation must be complete		
STATE OF	•	aby a notary public.	
On this	day of	, 20, before me personally appeared, to me known to be the person described in	, and
who executed the fo act and deed.	regoing instrument and ack	nowledged that he/she executed the same as his/he	r free
	REOF, I have hereunto set n day and year first above wr	ny hand and affixed my official seal in the County an tten.	ıd
		, Notary Po	—— ublic
		County, State of Mis	
My commission expi	rec.		