Form CAFC140 - Property and Debt Statement

For use in Motions to Modify

In what Missouri county was the custody or support judgment entered?

In the Circuit Court of

MISSOURI

What is the case number of the custody or support judgment?

Case Number

Division Number

Answer all questions on this form completely.

Your Information	My current full name is:					
	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)	
	 I filed the original case. (Petitioner/Plaintiff) I did not file the original case. (Respondent/Defendant) I am the Mother I am the Father 					
						
Other Party's Information						
	(First Name)	(Middle Name)	(Last Name)		(Jr./Sr./III)	
		1				
Property Owned by	Item of Pro	perty	Present Fair Market Value (Do not deduct amount owed from this value)	Monthly Income from Property	Amount Owed on Property? (List Debt in Table 2)	
You	Property is anything you own or you are in the process of buying. Anything you consider yours is property that should be listed. This includes anything that you might own with another person.					
					□ Yes □ No	
					☐ Yes ☐ No	
					☐ Yes ☐ No	
					☐ Yes ☐ No	
					☐ Yes ☐ No	
					☐ Yes ☐ No	
					☐ Yes ☐ No	
					☐ Yes ☐ No	
					☐ Yes ☐ No	

Property Owned by	Item of Property	Present Fair Market Value (Do not deduct amount owed from this value)	Monthly Income from Property	Amount Owed on Property? (List Debt in Table 2)
You				☐ Yes ☐ No
(Continued)				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
				☐ Yes ☐ No
		1		
Debts Owed by You	Creditor	Current Balance	Monthly Payment on Loan	Security for Loan (This property should be listed in Table 1)

I certify under oath that I have given the other party a copy of this Property and Debt Statement pursuant to Missouri Supreme Court Rule 43.01(d) by: (*You MUST check at least ONE of the following four boxes*)

Mailing a copy to the other party or his or her attorney on ______(Date) at the following address:

	(Street)			
	(City)	(State)	(Zip)	_
	Handing a copy to the other part	y or his or her attorne	ey on	(Date).
	Sending a copy to the other part	y or his or her attorne	ey by fax to	
	(fax number)			
	(To be used only by written conse party or his or her attorney at			g a copy via electronic mail to the other (Email Address) on
	(Date)			· · · · · · · · · · · · · · · · · · ·
publi	c. The "Affiant" is the person that is compl JNTY OF	eting this document.		t Statement is required to be verified before a notary
	t the facts stated in this Prope			or she is the affiant named herein and ling to his or her best knowledge and
►/	Affiant – SIGN HERE		ffiant - PRINT YOUF	R NAME HERE
Sub	scribed and sworn to on		\backslash	

Sign here in front of a Notary Public

Notary Public

My Commission Expires: _____