

\_\_\_\_\_  
Full Name of Party Filing This Document

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City, State and Zip Code

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Telephone Number

IN THE DISTRICT COURT OF THE \_\_\_\_\_ JUDICIAL DISTRICT OF  
THE STATE OF IDAHO, IN AND FOR THE COUNTY OF \_\_\_\_\_

\_\_\_\_\_,  
Plaintiff,  
vs.  
\_\_\_\_\_,  
Defendant.

Case No.: \_\_\_\_\_

AFFIDAVIT VERIFYING INCOME

STATE of Idaho )  
County of \_\_\_\_\_ ) ss.

I hereby state under oath that the following information is true:

A.	GROSS INCOME	FATHER	MOTHER
1.	Wages, salary, commissions, bonuses, etc.	_____	_____
2.	Rent, royalties, trade, or business income, etc. (Net of ordinary & necessary expenses)	_____	_____
3.	Interest, dividends, pensions, annuities, etc.	_____	_____
4.	Social security, worker's compensation, unemployment benefits, disability, veterans' benefits, etc.	_____	_____
5.	Public assistance, welfare for self (not children)	_____	_____
6.	Alimony	_____	_____
7.	Grants, distributions from trusts, etc.	_____	_____
8.	Other	_____	_____
9.	SUBTOTAL	_____	_____
B.	DEDUCTIONS FROM GROSS INCOME (I.C.S.G. Sections 6 and 7)		
1.	Straight line depreciation on assets	_____	_____
2.	One-half of self-employment Social Security taxes	_____	_____
3.	Child support & alimony from another relationship	_____	_____
4.	Support for child of another relationship living in the home	_____	_____
5.	DEDUCTIONS SUBTOTAL	_____	_____

	FATHER	MOTHER
C. GROSS INCOME, AS ADJUSTED (line B5 subtracted from line A9)	_____	_____
D. IN-KIND BENEFITS (I.C.S.G. Section 6(b)) (Housing, food, transportation, recreation)	_____	_____
E. POTENTIAL INCOME (I.C.S.G. Section 6(c)) Potential earned income + Potential unearned income	_____	_____
F. GUIDELINES INCOME (C + D + E)	_____	_____
G. MONTHLY I.C.S.G. INCOME (F÷12 months)	_____	_____

\_\_\_\_\_  
 Typed/Printed Name of Person Signing

\_\_\_\_\_  
 Signature

Subscribed and sworn to before me on \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
 Notary Public for Idaho  
 Residing at: \_\_\_\_\_  
 My commission expires: \_\_\_\_\_