

**PLAINTIFF'S AFFIDAVIT IN
SUPPORT OF REQUEST
FOR A CHILD SUPPORT ORDER**

DOCKET NO. (FOR COURT USE ONLY)

TRIAL COURT OF MASSACHUSETTS



PLAINTIFF'S NAME

DEFENDANT'S NAME

COURT DIVISION

I, _____, do state or affirm that the following is true to the best of my knowledge and belief:

1. The Defendant is the mother/father (*circle one*) and I am the legal custodian of the following child(ren).

2. The Defendant works as a _____.

The Defendant works for _____,

whose address is _____.

3. My gross income and my expenses are as follows:

Gross income (income before taxes)	I make \$_____ per week/month (<i>circle one</i>).
Health insurance	I pay \$_____ per week/month (<i>circle one</i>).
Dental and/or vision insurance	I pay \$_____ per week/month (<i>circle one</i>).
My child care expenses for child(ren) listed in Par. 1	I pay \$_____ per week/month (<i>circle one</i>).
Other child support obligations	I pay \$_____ per week/month (<i>circle one</i>).

4. Based on my knowledge, the Defendant's gross income and his/her expenses are as follows:

Gross income (income before taxes)	S/he makes \$_____ per week/month (<i>circle one</i>).
Health insurance	S/he pays \$_____ per week/month (<i>circle one</i>).
Dental and/or vision insurance	S/he pays \$_____ per week/month (<i>circle one</i>).
Defendant's child care expenses for child(ren) listed in Par. 1	S/he pays \$_____ per week/month (<i>circle one</i>).
Other child support obligations	S/he pays \$_____ per week/month (<i>circle one</i>).

☐ I state that the above is true, signed under penalties of perjury.

PLAINTIFF'S PRINTED NAME

DATE

PLAINTIFF'S SIGNATURE