


<b>FINANCIAL STATEMENT OF JUDGMENT DEBTOR</b>		DOCKET NUMBER	<b>Trial Court of Massachusetts Small Claims Session</b>		
CASE NAME			COURT DIVISION		
NAME OF JUDGMENT DEBTOR <i>(the person who lost the case and owes money)</i>			<input type="checkbox"/> BOSTON MUNICIPAL COURT _____ Division <input type="checkbox"/> DISTRICT COURT _____ Division <input type="checkbox"/> HOUSING COURT _____ Division		
HOME ADDRESS		HOME TELEPHONE NUMBER	DATE OF BIRTH		
SOCIAL SECURITY NUMBER	DRIVER'S LICENSE NUMBER & STATE	MARITAL STATUS	NO. & AGE OF CHILDREN LIVING WITH YOU		
OCCUPATION	EMPLOYER'S NAME & ADDRESS		HOW LONG WITH EMPLOYER?		

<b>INCOME</b> <i>(list all sources)</i>		
Your Gross Pay:	\$ .....	per week
Your Take-Home Pay:	\$ .....	per week
Spouse's Take-Home Pay:	\$ .....	per week
Child Support Income:	\$ .....	per week
Pension:	\$ .....	per week
AFDC/SSI:	\$ .....	per week
Other (itemize on back):	\$ .....	per week
<b>Total Weekly Income:</b>	<b>\$ .....</b>	<b>per week</b>

<b>EXPENSES</b>		
Rent/Mortgage:	\$ .....	per week
Utilities:	\$ .....	per week
Food:	\$ .....	per week
Alimony/Child Support:	\$ .....	per week
Child Care:	\$ .....	per week
Transportation:	\$ .....	per week
Insurance:	\$ .....	per week
Entertainment (including cable):	\$ .....	per week
Other (itemize on back):	\$ .....	per week
<b>Total Weekly Expenses:</b>	<b>\$ .....</b>	<b>per week</b>

<b>ASSETS</b> <i>(list value of all assets)</i>		
<i>Real Estate you own or co-own</i>	<u>RESIDENCE</u>	<u>OTHER</u>
Address:	.....	
Other Owner(s):	.....	
Mortgage Balance:	\$.....	\$.....
Fair Market Value:	\$.....	\$.....
Rental Income:	\$.....	\$.....
<i>Vehicle(s)/Boat(s) You Own</i>	<u>VEHICLE/BOAT 1</u>	<u>VEHICLE/BOAT 2</u>
Year/Make & Model:	.....	
Purchase Year:	.....	
Purchase Price:	\$.....	\$.....
Amount Owed:	\$.....	\$.....
<i>Bank Accounts</i>	<u>CHECKING</u>	<u>SAVINGS</u>
Bank/Credit Union:	.....	
Account No.:	.....	
Balance:	\$.....	\$.....
<i>Expected Tax Refund:</i>	\$.....	
<i>How much money do you have in cash?</i>	\$.....	
<i>Have you disposed of or transferred any asset since this claim was brought? (If so, explain on back.)</i> <input type="checkbox"/> No <input type="checkbox"/> Yes		
<i>(List on back anything of value not listed above that you own or co-own, or that is held for you by another.)</i>		

<b>DEBTS</b> <i>(list all debts not included above in your expenses – e.g., credit card debts)</i>				
CREDITOR	NATURE OF DEBT	DATE OF ORIGIN	TOTAL DUE	WEEKLY PAYMENT
1 .....	.....	.....	\$.....	\$.....
2 .....	.....	.....	\$.....	\$.....
3 .....	.....	.....	\$.....	\$.....

Under the penalties of perjury, I swear that the above information is complete and accurate to the best of my personal knowledge.

DATE SIGNED	SIGNATURE OF JUDGMENT DEBTOR
	X

**Pursuant to Uniform Small Claims Rule 9(c), all information in this affidavit is CONFIDENTIAL. It shall be available to any other party to this litigation, but shall not be available for public inspection unless the Court so orders.**

**INCOME AND PROPERTY  
THAT ARE  
EXEMPT FROM PAYMENT ORDERS**

(This list of exempt income and property is not comprehensive. It is provided to assist the court in avoiding the issuance of orders that would require payment from exempt sources. *When requesting a payment order, the creditor bears the burden of proving that the debtor has sufficient non-exempt income or property with which to satisfy the judgment.* See G.L. c. 224, § 16.)

**1. INCOME FROM THE FOLLOWING SOURCES** is exempt by law from payment orders:

- Unemployment Benefits (G.L. c. 151A, § 36)
- Workers Compensation Benefits (G.L. c. 152, § 47)
- Social Security Benefits (42 U.S.C. § 401)
- Federal Old-Age, Survivors & Disability Insurance Benefits (42 U.S.C. § 407)
- Supplementary Security Income (SSI) for Aged, Blind & Disabled (42 U.S.C. § 1383[d][1])
- Other Disability Insurance Benefits up to \$400 weekly (G.L. c. 175, § 110A)
- Emergency Aid for Elderly & Disabled (G.L. c. 117A)
- Veterans Benefits
  - Federal Veterans Benefits (38 U.S.C. § 5301[a])
  - Special Benefits for Certain WW II Veterans (42 U.S.C. § 1001)
  - Medal of Honor Veterans Benefits (38 U.S.C. § 1562)
  - State Veterans Benefits (G.L. c. 115, § 5)
- Transitional Aid to Families with Dependent Children (AFDC) Benefits (G.L. c. 118, § 10)
- Maternal Child Health Services Block Grant Benefits (42 U.S.C. § 701)
- Other public assistance benefits (G.L. c. 235, § 34, cl. fifteenth)
- Payouts from certain Massachusetts employee pension plans (G.L. c. 32, § 19)

**2. Certain PERSONAL AND REAL PROPERTY** is also exempt from payment orders, including:

- \$2,500 in cash or savings or other deposits in a banking or investment institution (G.L. c. 235, § 34, cl. fifteenth)
- Automobile or vehicle up to exemption limit (G.L. c. 235, § 34, cl. sixteenth)
- Other specific types of personal property are exempt under other clauses of G.L. c. 235, § 34
- Real estate subject to automatic or declared homestead exemption (G.L. c. 188) and, in lieu thereof, the amount of money necessary for rent, up to \$2,500 per month (G.L. c. 235, § 34, cl. fourteenth)
- There are also exemptions for “aggregate” amounts, up to maximum limits, of certain unused exemptions (G.L. c. 235, § 34, cl. seventeenth)

**3. In addition, A PORTION OF WAGES AND CONTRIBUTIONS TO EMPLOYMENT-BASED RETIREMENT PLANS** is exempt by law from payment orders.

Massachusetts law exempts the greater of 85% of the debtor’s gross earnings or 50 times the greater of the Federal minimum wage (\$7.25 as of 7/24/09) or the Massachusetts minimum wage (\$10/hr. until 12/31/16 per G.L. c. 151, § 1; and \$11/hr. as of 1/1/17) for each week or portion thereof. (G.L. c. 224, § 16 & c. 235, § 34, cl. fifteenth). The amount exempt under federal law (15 U.S.C. § §1671-1677) may exceed the Massachusetts exemption. If so, the federal exemption applies.

See Worksheet for Computing Amount of Wages Exempt From Attachment, Execution and Payment Orders. <http://www.mass.gov/courts/docs/forms/small-claims/translated/english/exemption-worksheet.pdf>