

COURT

COUNTY OF

Index No.

Plaintiff,

Statement of Net Worth (DRL 236)

-against-

Defendant,

Date of commencement of action

(Complete all items, marking "NONE," "INAPPLICABLE" and "UNKNOWN," if appropriate)

STATE OF NEW YORK

COUNTY OF

SS.:

herein, being duly sworn, deposes and says that the following is an accurate statement as of ... of my net worth (assets of whatsoever kind and nature and wherever situated minus liabilities), statement of income from all sources and statement of assets transferred of whatsoever kind and nature and wherever situated:

I. FAMILY DATA:

- (a) Husband's age
(b) Wife's age
(c) Date married
(d) Date (separated) (divorced)
(e) Number of dependent children under 21 years
(f) Names and ages of children

(l) Husband's present address

Wife's present address

(m) Occupation of Husband

Occupation of Wife

(n) Husband's employer

(o) Wife's employer

(g) Custody of children Husband Wife

(h) Minor children of prior marriage: Husband Wife

(i) (Husband) (Wife) (paying) (receiving) as alimony (maintenance) and/or child support in connection with prior marriage

(p) Education, training & skills (Includes dates of attainment of degrees, etc.)

Husband

Wife

(j) Custody of children of prior marriage: Name

Address

Name

Address

(q) Husband's health

(r) Wife's health

(k) Is marital residence occupied by:

- Husband Wife Both

(s) Children's health

II. EXPENSES: (You may elect to list all expenses on a weekly basis or all expenses on a monthly basis; however, you must be consistent. If any items are paid on a monthly basis, divide by 4.3 to obtain weekly payments; if any items are paid on a weekly basis, multiply by 4.3 to obtain monthly payment. Attach additional sheet, if needed. Items included under "Other" should be listed separately with separate dollar amounts.)

Expenses listed weekly monthly

(a) Housing

- 1. Rent
- 2. Mortgage and amortization
- 3. Real estate taxes

- 4. Condominium charges
- 5. Cooperative apartment maintenance

Total: Housing 0.00

(b) Utilities

- 1. Fuel oil
- 2. Gas
- 3. Electricity

- 4. Telephone
- 5. Water

Total: Utilities 0.00

(c) Food

- 1. Groceries
- 2. School lunches
- 3. Lunches at work
- 4. Dining out

- 5. Liquor/alcohol
- 6. Home entertainment
- 7. Other

Total: Food 0.00

(d) Clothing

- 1. Husband
- 2. Wife

- 3. Children
- 4. Other

Total: Clothing 0.00

(e) Laundry

- 1. Laundry at home
- 2. Dry cleaning

- 3. Other

Total: Laundry 0.00

(f) Insurance

- 1. Life
- 2. Homeowner's/tenant's
- 3. Fire, theft and liability
- 4. Automotive
- 5. Umbrella policy

- 6. Medical plan
- 7. Dental plan
- 8. Optical plan
- 9. Disability
- 10. Worker's compensation
- 11. Other

Total: Insurance 0.00

(g) Unreimbursed medical

- 1. Medical
- 2. Dental
- 3. Optical
- 4. Pharmaceutical

- 5. Surgical, nursing, hospital
- 6. Other

Total: Unreimbursed medical 0.00

(h) Household maintenance

- 1. Repairs
- 2. Furniture, furnishings, housewares
- 3. Cleaning supplies
- 4. Appliances, including maintenance

- 5. Painting
- 6. Sanitation/carting
- 7. Gardening/landscaping
- 8. Snow removal
- 9. Extermination
- 10. Other

Total: Household maintenance 0.00

(i) Household help		3. Other		
1. Babysitter	.....		
2. Domestic (housekeeper, maid, etc.)	.....	Total: Household help	.....	0.00
(j) Automotive				
Year	Make	Personal	Business	
.....	
Year	Make	Personal	Business	
.....	
Year	Make	Personal	Business	
.....	
1. Payments	.....	5. Registration and license	.....
2. Gas and oil	.....	6. Parking and tolls	.....
3. Repairs	.....	7. Other	.....
4. Car wash	.....		
		Total: Automotive	.....	0.00
(k) Educational				
1. Nursery and pre-school	.....	6. School transportation	.....
2. Primary and secondary	.....	7. School supplies/books	.....
3. College	.....	8. Tutoring	.....
4. Post-graduate	.....	9. School events	.....
5. Religious instruction	.....	10. Other	.....
		Total: Educational	.....	0.00
(l) Recreational				
1. Summer camp	.....	9. Country club/pool club	.....
2. Vacations	.....	10. Health club	.....
3. Movies	.....	11. Sporting goods	.....
4. Theatre, ballet, etc.	.....	12. Hobbies	.....
5. Video rentals	.....	13. Music/dance lessons	.....
6. Tapes, CD's, etc.	.....	14. Sports lessons	.....
7. Cable television	.....	15. Birthday parties	.....
8. Team sports	.....	16. Other	.....
		Total: Recreational	.....	0.00
(m) Income taxes				
1. Federal	.....	3. City	.....
2. State	.....	4. Social Security and Medicare	.....
		Total: Income taxes	.....	0.00
(n) Miscellaneous				
1. Beauty parlor/barber	.....	10. Commutation and transportation	.....
2. Beauty aids/cosmetics, drug items	.....	11. Veterinarian/pet expenses	.....
3. Cigarettes/tobacco	.....	12. Child support payments (prior marriage)	.....
4. Books, magazines, newspaper	.....	13. Alimony and maintenance payments (prior marriage)	.....
5. Children's allowances	.....	14. Loan payments	.....
6. Gifts	.....	15. Unreimbursed business expenses	.....
7. Charitable contributions	.....		
8. Religious organization dues	.....	Total: Miscellaneous	.....	0.00
9. Union & organization dues	.....		
(o) Other				
1. _____	.....	3. _____	.....
2. _____	.....	4. _____	.....
		Total: Other	.....	0.00
		TOTAL EXPENSES:	.....	0.00

III. GROSS INCOME: (State source of income and annual amount. Attach additional sheet, if needed).

(a) Salary or wages; (State whether income has changed during the year preceding date of this affidavit If so, set forth name and address of all employers during preceding year and average weekly wage paid by each. Indicate overtime earnings separately. Attach previous year's W-2 or income tax return.)

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(b) Weekly deductions:

- 1. Federal tax
- 2. New York State tax
- 3. Local tax
- 4. Social Security
- 5. Medicare
- 6. Other payroll deductions (specify)

(c) Social Security number

(d) Number and name of dependents claimed

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(e) Bonus, commissions, fringe benefits (use of auto, memberships, etc.)

(f) Partnership, royalties, sale of assets (income and installment payments)

(g) Dividends and interest (state whether taxable not)

(h) Real estate (income only)

(i) Trust, profit sharing and annuities (principal distribution and income)

(j) Pension (income only)

(k) Awards, prizes, grants (state whether taxable)

(l) Bequests, legacies and gifts

(m) Income from all other sources (including alimony, maintenance or child support from prior marriage)

(n) Tax preference items:

1. Long term capital gain deduction

2. Depreciation, amortization or depletion

3. Stock options--excess of fair market value over amount paid

(o) If any child or other member of your household is employed, set forth name and that person's annual income

(p) Social Security

(q) Disability benefits

(r) Public assistance

(s) Other

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TOTAL INCOME 0.00

IV. ASSETS: (If any asset is held jointly with spouse or another, so state, and set forth your respective shares. Attach additional sheets, if needed.)

A. CASH ACCOUNTS

Cash

- 1.1 a. Location
- b. Source of funds
- c. Amount

.....
Total: Cash 0.00

Checking Accounts (See continuation page, if needed)

- 2.1 a. Financial institution
- b. Account number
- c. Title holder
- d. Date opened
- e. Source of funds
- f. Balance

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- 2.2 a. Financial institution
- b. Account number
- c. Title holder
- d. Date opened
- e. Source of funds
- f. Balance

.....
Total: Checking 0.00

Savings accounts (including individual, joint, totten trust, certificates of deposit, treasury notes)

- 3.1 a. Financial institution
- b. Account number
- c. Title holder
- d. Type of account
- f. Source of funds
- g. Balance

.....

- 3.2 a. Financial institution
- b. Account number
- c. Title holder
- d. Type of account
- e. Date opened
- f. Source of funds
- g. Balance

.....
Total: Savings 0.00

Security deposits, earnest money, etc.

- 4.1 a. Location
- b. Title owner
- c. Type of deposit
- d. Source of funds
- e. Date of deposit
- f. Amount

.....
Total: Security
Deposits, etc. 0.00

Other.

- 5.1. a. Location
- b. Title owner
- c. Type of account
- d. Source of funds
- e. Date of deposit
- f. Amount

Total: Other 0.00

TOTAL: CASH ACCOUNTS 0.00

B. SECURITIES

Bonds, notes, mortgages

- 1.1 a. Description of security
- b. Title holder
- c. Location
- d. Date of acquisition
- e. Original price or value
- f. Source of funds to acquire
- g. Current value

Total: Bonds, notes, etc. 0.00

Stocks, options and commodity contracts

- 2.1 a. Description of security
- b. Title holder
- c. Location
- d. Date of acquisition
- e. Original price or value
- f. Source of funds to acquire
- g. Current value

- 2.2 a. Description of security
- b. Title holder
- c. Location
- d. Date of acquisition
- f. Source of funds to acquire
- g. Current value

- 2.3 a. Description of security
- b. Title holder
- c. Location
- d. Date of acquisition
- e. Original price or value
- f. Source of funds to acquire
- g. Current value

Total: Stock, option, etc. 0.00

Broker margin accounts

- 3.1 a. Name and address of broker
- b. Title holder
- c. Date account opened
- d. Original value of account
- e. Source of funds
- f. Current value

Total: Margin accounts 0.00

Total value of securities: 0.00

C. Loans to others and accounts receivable

- 1.1 a. Debtor's name and address
- b. Original amount of loan or debt
- c. Source of funds from which loan made or origin of debt
-
- d. Date payment(s) due
- e. Current amount due

- 1.2 a. Debtor's name and address
- b. Original amount of loan or debt
- c. Source of funds from which loan made or origin of debt
-
- d. Date payment(s) due
- e. Current amount due

Total: Loans & accounts receivable 0.00

D. Value of interest in any business

- 1.1 a. Name and address of business
- b. Type of business (corporate, partnership, sole proprietorship or other)
-
- c. Your capital contribution
- d. Your percentage of interest
- e. Date of acquisition
- f. Original price or value
- g. Source of funds to acquire
- h. Method of valuation
- i. Other relevant information
- j. Current net worth of business

Total: Value of business interest 0.00

E. Cash surrender value of life insurance

- 1.1 a. Insurer's name and address
- b. Name of insured
- c. Policy number
- d. Face amount of policy
- e. Policy owner
- f. Date of acquisition
- g. Source of funding to acquire
- h. Current cash surrender value

Total: Value of life insurance 0.00

F. Vehicles (automobile, boat, plane, truck, camper, etc.)

- 1.1 a. Description
- b. Title owner
- c. Date of acquisition
- d. Original price
- e. Source of funds to acquire
- f. Amount of current lien unpaid
- g. Current fair market value

- 1.2 a. Description
- b. Title owner
- c. Date of acquisition
- d. Original price
- e. Source of funds to acquire
- f. Amount of current lien unpaid
- g. Current fair market value

Total: Value of vehicles 0.00

G. Real estate (including real property, leaseholds , life estates, etc. at market value- - not deduct any mortgage)

1.1 a. Description	.....
b. Title owner	.....
c. Date of acquisition	.....
d. Original price	.....
e. Source of funds to acquire	.....
f. Amount of mortgage or lien unpaid	.....
g. Estimated current market value	.....
1.2 a. Description	.....
b. Title owner	.....
c. Date of acquisition	.....
d. Original price	.....
e. Source of funds to acquire	.....
f. Amount of mortgage or lien unpaid	.....
g. Estimated current market value	.....
1.3 a. Description	.....
b. Title owner	.....
c. Date of acquisition	.....
d. Original price	.....
e. Source of funds to acquire	.....
f. Amount of mortgage or lien unpaid	.....
g. Estimated current market value	.....
		Total: Value of real estate
		..... 0.00

H. Vested interests in trusts (pension, profit sharing, legacies, deferred compensation and others)

1.1 a. Description of trust	.....
b. Location of assets	.....
c. Title owner	.....
d. Date of acquisition	.....
e. Original investment	.....
f. Source of funds	.....
g. Amount of unpaid liens	.....
h. Current value	.....
1.2 a. Description of trust	.....
b. Location of assets	.....
c. Title owner	.....
d. Date of acquisition	.....
e. Original investment	.....
f. Source of funds	.....
g. Amount of unpaid liens	.....
h. Current value	.....
		Total: Vested interest in trusts
		..... 0.00

I. Contingent interest (stocks options, interests subject to life estates, prospective inheritances, etc.)

1.1 a. Description	.....
b. Location	.....
c. Date of vesting	.....
d. Title owner	.....
e. Date of acquisition	.....
f. Original price of value	.....
g. Source of funds to acquire	.....
h. Method of valuation	.....
i. Current value	.....
		Total: Contingent interests
		..... 0.00

J. Household furnishings

- 1.1 a. Description
- b. Location
- c. Title owner
- d. Original price
- e. Source of funds to acquire
- f. Amount of lien unpaid
- g. Current value

Total: Household furnishings 0.00

K. Jewelry, art, antiques, precious objects, gold and precious metals (only if valued at more than \$500)

- 1.1 a. Description
- b. Title owner
- c. Location
- d. Original price or value
- e. Source of funds to acquire
- f. Amount of lien unpaid
- g. Current value

- 1.2 a. Description
- b. Title owner
- c. Location
- d. Original price or value
- e. Source of funds to acquire
- f. Amount of lien unpaid
- g. Current value

Total: Jewelry, art, etc. 0.00

L. Other (e.g., tax shelter investments, collections, judgments, causes of action, patents, trademarks, copyrights, and any other asset not herein above itemized)

- 1.1 a. Description
- b. Title owner
- c. Location
- d. Original price or value
- e. Source of funds to acquire
- f. Amount of lien unpaid
- g. Current value

- 1.2 a. Description
- b. Title owner
- c. Location
- d. Original price or value
- e. Source of funds to acquire
- f. Amount of lien unpaid
- g. Current value

- 1.3 a. Description
- b. Title owner
- c. Location
- d. Original price or value
- e. Source of funds to acquire
- f. Amount of lien unpaid
- g. Current value

Total: Other 0.00

TOTAL ASSETS 0.00

V. LIABILITIES

A. Accounts payable

1.1 a. Name and address of creditor
b. Debtor
c. Amount of original debt
d. Date of incurring debt
e. Purpose
f. Monthly or other periodic payment
g. Amount of current debt

1.2 a. Name and address of creditor
b. Debtor
c. Amount of original debt
d. Date of incurring debt
e. Purpose
f. Monthly or other periodic payment
g. Amount of current debt

1.3 a. Name and address of creditor
b. Debtor
c. Amount of original debt
d. Date of incurring debt
e. Purpose
f. Monthly or other periodic payment
g. Amount of current debt

1.4 a. Name and address of creditor
b. Debtor
c. Amount of original debt
d. Date of incurring debt
e. Purpose
f. Monthly or other periodic payment
g. Amount of current debt

1.5 a. Name and address of creditor
b. Debtor
c. Amount of original debt
d. Date of incurring debt
e. Purpose
f. Monthly or other periodic payment
g. Amount of current debt

1.6 a. Name and address of creditor
b. Debtor
c. Amount of original debt
d. Date of incurring debt
e. Purpose
f. Monthly or other periodic payment
g. Amount of current debt

Total: Accounts payable 0.00

B. Notes payable

- 1.1 a. Name and address of note holder
- b. Debtor
- c. Amount of original debt
- d. Date of incurring debt
- e. Purpose
- f. Monthly or other periodic payment
- g. Amount of current debt

- 1.2 a. Name and address of note holder
- b. Debtor
- c. Amount of original debt
- d. Date of incurring debt
- e. Purpose
- f. Monthly or other periodic payment
- g. Amount of current debt

Total: Notes payable 0.00

C. Installment accounts payable (security agreements, chattel mortgages)

- 1.1 a. Name and address of creditor
- b. Debtor
- c. Amount of original debt
- d. Date of incurring debt
- e. Purpose
- f. Monthly or other periodic payment
- g. Amount of current debt

- 1.2 a. Name and address of creditor
- b. Debtor
- c. Amount of original debt
- d. Date of incurring debt
- e. Purpose
- f. Monthly or other periodic payment
- g. Amount of current debt

Total: Installment accounts 0.00

D. Broker's margin accounts

- 1.1 a. Name and address of broker
- b. Amount of original debt
- c. Date of incurring debt
- d. Purpose
- e. Monthly or other periodic payment
- f. Amount of current debt

Total: Brokers' margin accounts 0.00

E. Mortgages payable on real estate

- 1.1 a. Name and address of mortgagee
- b. Address of property mortgaged
- c. Mortgagor(s)
- d. Original debt
- e. Date of incurring debt
- f. Monthly or other periodic payment
- g. Amount of current debt

I.2 a. Name and address of mortgagee
 b. Address of property mortgaged
 c. Mortgagor(s)
 d. Original debt
 e. Date of incurring debt
 f. Monthly or other periodic payment
 g. Maturity date
 h. Amount of current debt
 Total: Mortgages payable 0.00

F. Taxes payable
 I.1 a. Description of tax
 b. Amount of tax
 c. Date due
 Total: Taxes payable

G. Loans on life insurance policies
 I.1 a. Name and address of insurer
 b. Amount of loan
 c. Date incurred
 d. Purpose
 e. Name of borrower
 f. Monthly or other periodic payment
 g. Amount of current debt
 Total: Life insurance loans 0.00

H. Other liabilities
 I.1 a. Description
 b. Name and address of creditor
 c. Debtor
 d. Original amount of debt
 e. Date incurred
 f. Purpose
 g. Monthly or other periodic payment
 h. Amount of current debt

I.2 a. Description
 b. Name and address of creditor
 c. Debtor
 d. Original amount of debt
 e. Date incurred
 f. Purpose
 g. Monthly or other periodic payment
 h. Amount of current debt
 Total: Other Liabilities 0.00
 TOTAL LIABILITIES 0.00

NET WORTH

TOTAL ASSETS: 0.00
 TOTAL LIABILITIES: (minus) 0.00
 NET WORTH: 0.00

VI. ASSETS TRANSFERRED: (List all assets transferred in any manner during the preceding three years, or length of the marriage, whichever is shorter [transfers in the routine course of business which resulted in an exchange of assets of substantially equivalent value need not be specifically disclosed where such assets are otherwise identified in the statement of net worth])

Description of Property	To Whom Transferred and Relationship to Transferee	Date of Transfer	Value
.....
.....
.....
.....
.....

VII. SUPPORT REQUIREMENTS:

(a) Deponent is at present (paying) (receiving) per (week) (month) and prior to separation (paid) (received) per (week) (month) to cover expenses for

These payments are being made (voluntarily) (pursuant to court order or judgement) (pursuant to separation agreement), and there are (no) arrears outstanding (in the sum of \$ to date).

(b) Deponent requests for support of each child per (week) (month)
 Total for children

(c) Deponent requests for support of self per (week) (month)

(d) The day of the (week) (month) on which payment should be made is

VIII. COUNSEL FEE REQUIREMENTS:

(a) Deponent requests for counsel fees and disbursements the sum of

(b) Deponent has paid counsel the sum of and has agreed with counsel concerning fees as follows:

(c) There is (not) a retainer agreement or written agreement relating to payment of legal fees. (A copy of any such agreement must be annexed.)

IX. ACCOUNTANT AND APPRAISAL FEES REQUIREMENTS:

(a) Deponent requests for accountants' fees and disbursements the sum of (Include basis for fee, e.g., hourly rate, flat rate)

(b) Deponent requests for appraisal fees and disbursements the sum of (Include basis for fee, e.g., hourly rate, flat rate)

(c) Deponent requires the services of an accountant for the following reasons:

(d) Deponent requires the services of an appraiser for the following reasons:

X. Other data concerning the financial circumstances of the parties that should be brought to the attention of the Court are:

The foregoing statements and a rider consisting of page(s) annexed hereto and made part hereof have been carefully read by the undersigned who states that they are true and correct.

.....
 Petitioner Respondent
 Plaintiff Defendant

Sworn to before me this day of
2011

.....
SIGNATURE OF ATTORNEY

.....
ATTORNEY'S NAME (PRINT OR TYPE)

.....
.....
.....
ATTORNEY'S ADDRESS & TELEPHONE NUMBER

Continuation Sheet for Expenses

(j) Automotive

Year	Make	Personal	Business
Year	Make	Personal	Business
Year	Make	Personal	Business
Year	Make	Personal	Business
Year	Make	Personal	Business
Year	Make	Personal	Business

Continuation Page for Securities

F. Vehicles (automobile, boat, plane, truck, camper, etc.)

- 1.3 a. Description
- b. Title owner
- c. Date of acquisition
- d. Original price
- e. Source of funds to acquire
- f. Amount of current lien unpaid
- g. Current fair market value

- 1.4 a. Description
- b. Title owner
- c. Date of acquisition
- d. Original price
- e. Source of funds to acquire
- f. Amount of current lien unpaid
- g. Current fair market value

F. Vehicles (automobile, boat, plane, truck, camper, etc.)

- 1.5 a. Description
- b. Title owner
- c. Date of acquisition
- d. Original price
- e. Source of funds to acquire
- f. Amount of current lien unpaid
- g. Current fair market value

- 1.6 a. Description
- b. Title owner
- c. Date of acquisition
- d. Original price
- e. Source of funds to acquire
- f. Amount of current lien unpaid
- g. Current fair market value

- 1.7 a. Description
- b. Title owner
- c. Date of acquisition
- d. Original price
- e. Source of funds to acquire
- f. Amount of current lien unpaid
- g. Current fair market value

Checking Accounts

2.3 a. Financial institution

- b. Account number
- c. Title holder
- d. Date opened
- e. Source of funds
- f. Balance

2.4 a. Financial institution

- b. Account number
- c. Title holder
- d. Date opened
- e. Source of funds
- f. Balance

Savings accounts (including individual, joint, totten trust, certificates of deposit, treasury notes)

3.3. a. Financial institution

- b. Account number
- c. Title holder
- d. Type of account
- f. Source of funds
- g. Balance

3.4. a. Financial institution

- b. Account number
- c. Title holder
- d. Type of account
- e. Date opened
- f. Source of funds
- g. Balance

CLIENT CERTIFICATION

I, _____, under penalty of perjury, that I have carefully read and reviewed the annexed **STATEMENT OF NET WORTH** and that all information contained in that document is true and accurate in all respects to the best of my knowledge and understanding.

I FURTHER CERTIFY, under penalty of perjury, that neither my attorney, nor anyone acting on my attorney's behalf, was the source of any of the information contained in the annexed document; that I provided all of the information contained in the annexed document to my attorney; and that I understand that my attorney, in executing the Attorney Certification required by 22 NYCRR 202.16(e), is relying entirely upon the information provided by me and upon my certification that all such information is true and accurate.

I FURTHER CERTIFY that the annexed document includes all information which I provided to my attorney which is relevant to such document and that my attorney has not deleted, omitted or excluded any such information.

Dated: Wantagh, New York

ATTORNEY CERTIFICATION

I, **BARRY J. GROSS, ESQ., HEREBY CERTIFY**, under the penalty of perjury, that I have no actual knowledge that the substance of any statements of fact contained in the annexed document are false. This Certification is based solely and exclusively upon information provided by the client, and upon the client's certification to the undersigned attorney that such information is not false, and is not based upon any review, audit, examination, inquiry or investigation made by the undersigned attorney or anyone acting on behalf of said attorney.

PLEASE TAKE FURTHER NOTICE that this Certification is made by the attorney as an Officer of the Court and is directed solely and exclusively to the court in accordance with 22 NYCRR 202.16(e) and is expressly not directed or extended to the opposing party herein.

PLEASE TAKE FURTHER NOTICE that the opposing party may not and should not rely upon this Attorney Certification in assessing the truth or validity of the information contained in the annexed document. The credibility of this submission is no greater than the credibility of the client represented by the undersigned attorney and the opposing party should give this document no greater credence because it bears this Attorney Certification.

Dated: Wantagh, New York

BARRY J. GROSS