**Record No:**

**THE CIRCUIT FAMILY COURT**

**DUBLIN CIRCUIT COUNTY OF THE CITY OF DUBLIN**

**IN THE MATTER OF A DISTRICT COURT APPEAL**

Between:

Applicant

-and-

Respondent

**Affidavit of Means**

I, **INSERT NAME** of **INSERT ADDRESS**  aged 18 years and upwards MAKE OATH AND SAY as follows: -

1. I say that I am the \_\_\_\_\_\_\_\_\_\_\_\_\_ in the above entitled proceedings and I make this Affidavit of means from facts within my own knowledge, save where otherwise appears and where so otherwise appearing, I conscientiously believe the same to be true.

2. I set out in Schedule 1 hereto details of all the assets in which I am legally and/or beneficially entitled and the manner in which such assets are held.

3. I set in Schedule 2 hereto details all income presently received and the sources or source of such income.

4. I set in Schedule 3 hereto details of all my debts and liabilities and the persons to whom such debts and liabilities are due.

5. I set out in Schedule 4 hereto details of my weekly personal outgoings and

 expenditure amounting to the sum of €

6. I say that to the best of my knowledge, information and belief, all pension information known to me relevant to the within proceedings is set out in the 5th Schedule hereto.

**SCHEDULE 1**

**ASSETS**

Properties:- Estimated Value: €

Car: €

Current Account €

**SECOND SCHEDULE**

**INCOME/SALARY**

Employer: €

**THIRD SCHEDULE**

**DEBTS AND LIABILITIES**

Mortgage €

Credit Card €

Car Loan €

**FORTH SCHEDULE**

**WEEKLY PERSONAL OUTGOINGS**

Mortgage per week €

Groceries and Meat €

Gas & Electricity €

House Maintenance €

House Tax €

Life Insurance €

Health Insurance €

Gifts €

Mobile Phone €

Subscriptions (TV, Internet etc) €

Car Fuel €

Car Insurance €

Car Tax €

Car Maintenance €

Clothing/Shoes €

Medical €

Dental €

Entertainment €

Car Loan €

Optician €

Credit Card €

Gym €

**TOTAL OUT €**

**FIFTH SCHEDULE**

**PENSIONS DETAILS**

**SWORN** before me a Practicing Solicitor by **………………………………..**, at

in the County of the City of Dublin,

**Signed**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ this day of ………. 20.. and I

 know who has identified the Deponent to me

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Commissioner for Oaths / Practicing Solicitor.

Signed ­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Solicitor

 I certify that I know the Deponent