-			
1 2 3	Scott, Turchin = at address of record grat last known address 201	FILE SAP CODH 17 APR 26 AVID W. PR	PM 12: 39
4	DATED AND SIGNED on 425-57, in Port Orchard, Washington.		
5	Monun		
6			
7 8	SUPERIOR COURT OF WASHINGTON	-3-00	472 1
9	State of Washington on behalf of: NO: O MILDRED ANN VEDDER	1-3-0	001803
10	Petitioner FINANCIA	L DECLAF	ATION
11	vs. (FNDCLR)		
12 13	SCOTT PAUL TURCHIN Alleged Father		
14 15	SHAWNIE ANN VEDDER Mother		
16	Respondents		<u></u>
17	NAME: SHAWNIE ANN VEDDER		
18	I. SUMMARY OF BASIC INFORMATIO		<u> </u>
19	Declarant's Total Monthly Net Income (from § 3.3 below)	\$ <u>}</u> 2	4.00
20	Declarant's Total Household Expenses (from § 5.9 below)	\$	
21	Declarant's Total Monthly Debt Expenses (from § 5.11 below)		\$
22	Declarant's Total Expenses (from § 5.12 below)		\$
23	Estimate of the other party's gross monthly income (from § 3.1f below	/)	\$
24	II. PERSONAL INFORMATION	[]	unknown
25	2.1 Occupation:		
26	2.2 The highest year of education completed:		
27			
28	WPF 4D 01.0550 (6/2004)	614 Division S Port Orchard, W	ecuting Attorney treet MS-35

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1	2.3	Are you pres	sently employed [] yes 🖌 no		
2 3		a. If yes:	 Where do you work? List employers' na Confidential Information Form. When did you start work there (month/y 		
4 5	; ;	b. If no:	(1) When did you last work (month/year)?(2) What were your gross monthly earnings(3) Why are you presently unemployed?	2000 \$ 800.00 Disgibiler	
6 7	2.4	Names and o	lates of birth for all children to whom you owe	a duty of support:	
8			\rightarrow		
9			III. INCOME INFORMATION		
10 11	If child support is at issue, complete the Washington State Child Support Worksheet(s), skip paragraphs 3.1 and 3.2 and go to Paragraph 3.3 below.				
12 13 14 15 16 17 18 19 20 21 22 23 24	3.1	If you are pa monthly way 2.15. If you month, list t a. Wages & six mont b. Interest a c. Business d. Spousal I e. Other Inc f. Total Gro g. Actual G MONTHLY a. Income T b. FICA/Se c. State Ind d. MANDA e. Pension I f. Spousal N g. Normal I h. Total De	Maintenance received from ome ss Monthly Income (add lines 3.1a through 3.16 ross Income (Year to date) DEDUCTIONS FROM GROSS INCOME	eks, multiply your gross pay by bay by 2. If you are paid once a MOTHER FATHER $\frac{2}{5}$ $\frac{2}{5}$ $\frac{2}{5}$ $\frac{2}{5}$ $\frac{5}{5}$ $\frac{5}{$	
25 26	3.3	MONTHLY line 3 from t	NET INCOME (Line 3.1 minus 3.2 <u>or</u> he Child Support Worksheet	<u>s 824.00 s</u>	
27	WPF 41 RCW 2	CIAL DECLAR D 01.0550 (6/20 6.18.220(1) No. 1285412		RUSSELL D. HAUGE Kitsap County Prosecuting Attorney 614 Division Street MS-35 Port Orchard, WA 98366-4681 (360) 337-7020 Fax (360) 337-5733	

1 2 3	3.4 MISCELLANEOUS INCOME a. Child Support received from other relationships b. Other miscellaneous income (list source and amounts) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
4	$\frac{s}{s}$
5	c. Total Miscellaneous Income (add lines 3.4a-3.4c) \$
6	3.5 Income of Other Adults In Household \$\$
7	3.6 If the income of either party is disputed, state monthly income you believe is correct and explain below.
8	IV. AVAILABLE ASSETS
9	4.1 Cash on hand \$_100.00_
10	4.2 On deposit in banks $\frac{3000,00}{2000,00}$
11	4.3 Stocks and Bonds, cash value of life insurance \$
12	4.4 Other liquid assets: <u>\$</u>
13	V. MONTHLY EXPENSE INFORMATION
14 15	Monthly expenses for myself and dependents are: (Expenses should be calculated for the future, after separation, based on the anticipated residential schedule for the children.)
16 17 18 19	 5.1 HOUSING Rent, 1st Mortgage or contract payments Installment payments for other Mortgages or encumbrances Taxes & insurance (if not in monthly payment) Total Housing 5.2 UTILITIES
20 21 22 23 24 25 26	Heat, (gas & oil) $$ 50.0^{\circ}$ Electricity $$ 200.0^{\circ}$ Water, sewer, garbage $$ 100.0^{\circ}$ Telephone $$ 25.0^{\circ}$ Cable $$ 45.0^{\circ}$ Other $$ 49.0^{\circ}$ Total Utilities $$ 49.0^{\circ}$ 5.3FOOD AND SUPPLIESFood for 4 persons $$ 700.0^{\circ}$ Supplies (paper, pets, tobacco) $$ 700.0^{\circ}$ Meals eaten out $$ 20.0^{\circ}$ Other $$ 50.0^{\circ}$
27	Total Food Supplies
28	RUSSELL D. HAUGEFINANCIAL DECLARATIONKitsap County Prosecuting AttorneyWPF 4D 01.0550 (6/2004)614 Division Street MS-35RCW 26.18.220(1)Port Orchard, WA 98366-4681SEMS No. 1285412(360) 337-7020 Fax (360) 337-5733Page 3Page 3

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1	5.4 CHILDREN Day Care/Babysitting	<u>\$ 450.00</u>
3	Clothing Tuition (if any) Other child related expenses	\$ <u>100.00</u> \$ \$
4	Other child related expenses Total Child Expenses	<u>\$ 20+.00</u> <u>\$ 700.00</u>
5	5.5 TRANSPORTATION	- N
6	Vehicle Payments or leases Vehicle insurance & license	\$ <u>3</u> \$ <u>4</u> 45
7	Vehicle gas, oil, ordinary maintenance Parking	\$ <u>150</u> \$ <u>\$</u>
8	Other Transportation expense Total Transportation	\$\$_ <u>195</u>
9	5.6 HEALTH CARE (Omit if fully Covered) Insurance	\$ 93.50
10	Uninsured dental, orthodontic, medical, eye care expenses	\$ <u>30</u>
11	Other uninsured medical health expenses Total Health Care	ss_12_3.50
12	5.7 PERSONAL EXPENSES (not including children) Clothing	
13 14	Hair care/personal care	\$ 100 \$
14	Clubs and recreation Education	\$ 40 \$ 202
15	Books, newspapers, magazines and photos Gifts	\$ 50
17	Other Total Personal Expenses	<u>\$\$_395_</u>
18	5.8 MISCELLANEOUS EXPENSES	<u>^</u>
19	Life insurance (if <u>not</u> deducted from income) Other	\$ \$
20	Other Total Miscellaneous Expense	\$\$
21		
22		
23		
24		
25		
26		
27		
28	FINANCIAL DECLARATION WPF 4D 01.0550 (6/2004) RCW 26.18.220(1) SEMS No. 1285412 Page 4	RUSSELL D. HAUGE Kitsap County Prosecuting Attorney 614 Division Street MS-35 Port Orchard, WA 98366-4681 (360) 337-7020 Fax (360) 337-5733
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	r r						
1	5.9	TOTAL HO	ISFHOLD FX	PFNSES (The	total of Parama	oh 5.1 through	58) \$ (200 3,320
2	5.9 TOTAL HOUSEHOLD EXPENSES (The total of Paragraph 5.1 through 5.8) \$ 9783, 37 5.10 INSTALLMENT DEBTS INCLUDED IN PARAGRAPHS 5.1 THROUGH 5.8						
3	5,10		Desci	ription	Month of		
4		Creditor (5A	of De Horn	<u>Dt</u> 2	<u>Balance</u> 117	Last Payment 483	:
5			11011	\sim	117/20-		
6	ŗ						
7							
8	5.11	OTHER DEI THROUGH		NTHLY EXPE	ENSES NOT INC	CLUDED IN P.	ARAGRAPHS 5.1
9	ł		Description		Month of	Amount of Monthly	
10		Creditor	of Debt	Balance	Last Payment		
11		chase	22-	-800			
12							
13		Total Monthl	v Paymente for	Other Debte a	and Monthly Exp	oenses \$ J	0
14	5.12		PENSES (Add j				320
15	5.12	IUIALLA			,	♪ <u>_</u>	<u> </u>
16		A	6. H		DRNEY FEES	¢	0
17	6.1	-	for attorney fe		date:	\$	
18	6.2		f this money w				\bigcirc
19	6.3		ts incurred to d			\$	
20	6.4	_	s for attorney f	ees and costs a	ıre:		0
21	6.5	Other:				\$	
22							
23							
24 25							
23 26							
27							
28	r					RUS S ELL D	HAUGE
	WPF 4 RCW 2	ICIAL DECLAR/ D 01.0550 (6/200 26.18.220(1) No. 1285412				Kitsap County Pros 614 Division S Port Orchard, W (360) 337-7020 Fax	secuting Attorney Street MS-35 A 98366-4681
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†				
1 2	I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.			
3	Signed at Shelton Un on <u>4-13-07</u> (City and State) (Date)			
4	(City and State) (Date)			
5	51			
6	SHAWNIE ANN VEDDER			
7	The following financial records are being provided to the other party and filed separately with the court: Financial records pertaining to myself:			
8	Individual [] Partnership or Corporate Income Tax returns for the years 2005, 2006 including all W-2s and schedules;			
9 10	[] Pay stubs for the dates:			
10	DO NOT ATTACH THESE FINANCIAL RECORDS TO THE FINANCIAL DECLARATION.			
12	THESE FINANCIAL RECORDS SHOULD BE SERVED ON THE OTHER PARTY AND FILED WITH THE COURT SEPARATELY USING THE SEALED FINANCIAL SOURCE			
13	DOCUMENTS COVER SHEET. IF FILED SEPARATELY USING THE COVER SHEET, THE RECORDS WILL BE SEALED TO PROTECT YOUR PRIVACY (ALTHOUGH THEY WILL BE AVAILABLE TO THE OTHER PARTIES IN THE CASE, THEIR ATTORNEYS,			
14	WILL BE AVAILABLE TO THE OTHER PARTIES IN THE CASE, THEIR ATTORNEYS, AND CERTAIN OTHER INTERESTED PERSONS. SEE GR 22(C)(2).			
15				
16				
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23				
24				
25 26				
20				
28	RUSSELL D. HAUGE			
20	FINANCIAL DECLARATION Kitsap County Prosecuting Attorney WPF 4D 01.0550 (6/2004) 614 Division Street MS-35 Pott Orchard, WA 98366-4681 (360) 337-7020 Fax (360) 337-5733 SEMS No. 1285412 Page 6			