

**Domestic Support Obligation Disclosure Form**

Case No.: \_\_\_\_-bk-\_\_\_\_\_

**Section 1: (To be completed by all Debtor's with a domestic support obligation.)**

Debtor: \_\_\_\_\_ Co-Debtor: \_\_\_\_\_

Are you responsible for any Domestic Support Obligations described in 11 U.S.C. Section 101(14A) [debt owed to or recoverable by spouse, former spouse, child, child's guardian or governmental unit in the nature of alimony, maintenance or support]?

Debtor:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Co-Debtor:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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**Section 2: (To be completed only if you answered "yes" above):**

Check one of the following:

Debtor's current marital status:	Co-Debtor's current marital status:
Married: <input type="checkbox"/> Divorced: <input type="checkbox"/>	Married: <input type="checkbox"/> Divorced: <input type="checkbox"/>
Separated: <input type="checkbox"/> Widowed: <input type="checkbox"/>	Separated: <input type="checkbox"/> Widowed: <input type="checkbox"/>

Domestic Support Recipient Information:

Check one of the following:

Spouse:  Ex-Spouse:  Child:  Other: 

Explain Other:

Recipient's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

If there are other receipts, please list with address on the back of this form. Yes  No Are support payments deducted from your paycheck? Yes  No 

Identify your Employer:

Employer's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Section 3: (To be signed by all Debtors)**

I swear or affirm under penalty of perjury pursuant to 28 U.S.C. Section 1746 that the information provided herein is true, correct and complete.

Debtor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co- Debtor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_