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Code: 1740

Name:

Alexander M. Falconi

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Reno, NV 89506

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775-391-9139CLERK OF DISTRICT COURT
DEPUTY
[Signature]

SECOND JUDICIAL DISTRICT COURT

WASHOE COUNTY, NEVADA

Alexander M. Falconi

Plaintiff / Petitioner,

Case No. FV08-03200Monica Ann Farmer

Defendant / Respondent.

Dept. No. 11

GENERAL FINANCIAL DISCLOSURE FORM

The judge uses this form to understand the financial position of the Plaintiff / Petitioner and the Defendant / Respondent. You must fill this form out completely and truthfully.

A. Personal Information:

1. What is your full name? (first, middle, last) Alexander M. Falconi
2. How old are you? 29
3. What is your date of birth? 4-15-84
4. What is your occupation? Paralegal
5. What is your highest level of education? Some college

B. Employment Information:

1. Are you currently employed?
 - ☐ No
 - ☒ Yes If yes, what is the name of your employer? Collection Service of Nevada
 - What date were you hired on? (mm/dd/yy) 6/6/2012
2. Are you disabled?
 - ☒ No
 - ☐ Yes If yes, what is your level of disability? _____
 - What agency certified you disabled? _____
 - What is the nature of the your disability? _____

DC-9900047468-005
FV08-03200
ALEXANDER M. FALCONI VS. MONICA ANN FARMER
District Court 07/10/2013 03:27 PM
1740
Washoe County
MI CLERK

C. Attorney Information: Complete the following sentences:

1. An Attorney (has/has not) has not been retained on my behalf in this case.
2. As of today, the attorney has been paid a total of \$ 0 on my behalf.
3. I have a credit with my attorney in the amount of \$ 0.
4. I currently owe my attorney a total of \$ 0.
5. I owe my prior attorney a total of \$ 0.

Section 1: Personal Income

Before you can complete the next section you need to figure out your pay frequency. Your pay frequency is determined by the number of times you are paid each month.

Pay Frequency Table

- 1.00= Paid one time per month
 2.00= Paid two times per month
 2.17= Paid every two weeks
 4.00= Paid every week

A. Fill in the line that applies to you. Only complete Line 1 **OR** Line 2.

Line #	Income Question	Amount Earned		Number of Hours Worked per Week		Pay Frequency (1.00, 2.00, 2.17, or 4.00)		Monthly Income
1	I am paid an hourly wage in the amount of	\$ 15	X	871.30	X	2	=	\$ 1742.60
2	I am paid a base salary in the amount of	\$ —		N/A	X	—	=	\$ —

B. Fill in the amount of money you receive each month from the following types of income.

Line #	Income Question	Amount Received Monthly
3	I regularly work overtime and each month earn an average of	\$ 0
4	I receive bonuses, commissions, or tips in the amount of	\$ 26.87
5	I receive a car, gas, housing, or other allowance in the amount of	\$ 0
6	I receive spousal support in the amount of	\$ 0

7	I receive social security in the amount of	\$ 0
8	I receive social security disability in the amount of	\$ 0
9	I receive workman's compensation benefits in the amount of	\$ 0
10	I receive unemployment benefits in the amount of	\$ 0
11	I receive pension or retirement income in the amount of	\$ 0
12	I receive net rental income on the amount of	\$ 0
13	I receive income from other sources in the amount of	\$ 133.33
14	Total Income Received (add lines 3-13)	\$ 160.00

C. Total monthly income from all sources:

Line #		
15	Total from Line 1 OR 2	\$ 1742.60
16	Total from Line 14	\$ 160.00
17	Total Gross Monthly Income (add lines 15-16)	\$ 1902.60

Section 2: Personal Deductions

A. Fill in the amount of money that is taken out of every paycheck for each of the following deductions:

Line #	Name of Deduction	Amount Deducted Monthly
18	Court Ordered Child Support is deducted from every paycheck in the amount of	\$ 0
19	Federal Income Tax is deducted from every paycheck in the amount of	\$ 52.13
20	Social Security Tax is deducted from every paycheck in the amount of	\$ 110.32
21	Medicare is deducted from every paycheck in the amount of	\$ 25.80
22	Union Dues are deducted from every paycheck in the amount of	\$ 0