

IN THE CIRCUIT COURT OF THE COUNTY OF ST. LOUIS, MISSOURI

ANGELA M. FREINER

January 14, 2021

Petitioner

Date

vs.

14SL-DR02617-01

Case Number

JAMES S. JUDY

31

Respondent

Division

STATEMENT OF INCOME AND EXPENSES OF

JAMES S. JUDY

NAME

XXX-XX-1746

SOCIAL SECURITY NUMBER

1. INCOME

A. Name and address of employer: Montana Paint, Inc., P.O. Box 610, Gallatin Gateway, MT 59730

Gross Wages or Salary and Commission each Pay Period 1,857.60

PAID: Weekly X Bi-weekly Semi-monthly Monthly

Number of Dependents Claimed:

Payroll Deductions:

FICA (Social Security Tax) 115.17

Federal Withholding Tax 113.00

State Withholding Tax 86.00

City Earnings Tax

Union Dues

Others:

Medicare 26.94

Family Support Payment Center – garnishment 127.85

Aflac 16.56

Total Deductions each Pay Period	468.96
Net Take Home Pay each Pay Period	1,388.64 - varies
B. Additional Income from Rentals, Dividends and Business Enterprises, Social Security, A.F.D.C., V.A. Benefits, Pensions, Annuities, Bonuses, Commissions and all other Sources (give monthly average and list sources of income).	
Average Monthly Total	
C. Total Average Net Monthly Income	3,008.72
D. Your Share of the Gross Income Shown on Last Year's Federal Income Tax Return (2019)	54,370.00

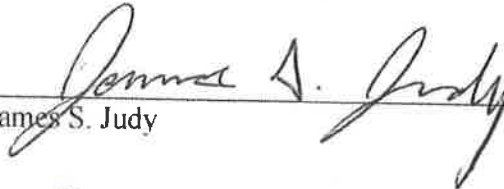
2. EXPENSES REQUIRED TO MAINTAIN PREVIOUS STANDARD OF LIVING STATED ON A MONTHLY AVERAGE

A. Rent or Mortgage Payments		1,380.00
B. Utilities		
1. Gas	20.00	
2. Water	40.00	
3. Electricity	60.00	
4. Telephone	125.00	
5. Trash Service	19.00	264.00
C. Automobiles		
1. Gas and Oil	100.00	
2. Maintenance (routine)	20.00	
3. Taxes and License	37.75	
4. Payment on Auto Loan	475.00	632.75
D. Insurance		
1. Life	-	
2. Health and Accident	350.00	
3. Disability	-	
4. Homeowners (if not included in mortgage payment)	100.00	

5. Automobile	100.00	550.00
E. Total Payment installment Contracts		
F. Child Support Paid to Others for Children Not in your Custody (excluding Children of this marriage)		
G. Maintenance or Alimony (excluding Petitioner or Respondent herein)		
H. Church and Charitable Contributions		50.00
I. Other Living Expenses (total of items 1 – 7 listed below)		670.00
	Yours	Children in Your Custody
1. Food	150.00	150.00
2. Clothing	30	100.00
3. Medical Care, Dental Care and Drugs	20.00	20.00
4. Recreation	50.00	100.00
5. Laundry and Cleaning		
6. Barber Shop or Beauty Shop		50.00
7. School and Books		
J. Day Care Center or Babysitter		
K. All other Expenses Not Presently Identified (give as a monthly average)		
Internet		100.00
Cable/ Streaming		200.00
Pets		30.00
Gifts		50.00
L. Total Average Monthly Expenses		3,926.75

STATE OF MONTANA)
) SS
COUNTY OF GALLATIN)

James S. Judy, the Respondent herein, being duly sworn upon his oath, deposes and states that the facts contained in the foregoing Statement of Income and Expense are true and correct according to his best knowledge, information and belief.


James S. Judy

Subscribed and sworn to before me this 14th day of January, 2021.


Notary Public

My commission expires: 6/26/24



Respectfully submitted by:



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