

AFFIDAVIT OF NO PAYSTUBS, ADVICES or DOCUMENTATION OF INCOME SOURCES

I/We, _____, do hereby certify, represent and warrant that I/we have not been employed, self-employed nor have I/we had any income from any sources for the six months preceding the current bankruptcy filing. As I/we have not been employed nor have I/we been self-employed and have had no source of income whatsoever, I/we do not have any paystubs, pay advices or any other type of documentation of an income source.

I/We declare under penalty of perjury that the foregoing is true and correct. Executed on the date or dates shown below.

Print Name of Debtor

Signature of Debtor

Print Name of Co Debtor

Signature of Co Debtor

STATE OF FLORIDA
COUNTY OF _____

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared _____, who has produced _____ as identification and who acknowledged that he/she/they executed the foregoing for the purposes contained.

WITNESS my hand and official seal in the County and State last aforesaid this ___ day of _____, 20____.

NOTARY PUBLIC

Printed Name