

IN THE CIRCUIT COURT OF THE 15TH
JUDICIAL CIRCUIT IN AND FOR
PALM BEACH COUNTY, FLORIDA

FAMILY DIVISION
CASE NO: CD 70-3364-FD

IN RE: THE FORMER MARRIAGE OF
WILLIAM A. CABANA,
Petitioner/Former Husband,
and
SHARON ANN MAYO f/k/a
SHARON ANN CABANA
Respondent/Former Wife.

FAMILY LAW FINANCIAL AFFIDAVIT (SHORT FORM)
(Under \$50,000 Individual Gross Annual Income)

I, SHARON ANN MAYO, being sworn, certify that the following information is true:

My Occupation: Customer Service

Employed by: Florida Power and Light

Business Address: 700 Universe Blvd., Juno Beach, FL 33408-0420

Pay rate: \$ 682.50

() every week () every other week () twice a month () monthly () other:

Check here if unemployed and explain on a separate sheet your efforts to find employment.

SECTION I. PRESENT MONTHLY GROSS INCOME:

- | | | | |
|--|-----|-------|--------------------|
| 1. Monthly gross salary or wages | 1. | \$ | 1,479.00 |
| 2. Monthly bonuses, commissions, allowances, overtime, tips, and similar payments | 2. | | |
| 3. Monthly business income from sources such as self-employment, partnerships, close corporations, and/or independent contracts (gross receipts minus ordinary and necessary expenses required to produce income) (<input type="checkbox"/> Attach sheet itemizing such income and expenses.) | 3. | | |
| 4. Monthly disability benefits/SSI | 4. | | |
| 5. Monthly Workers' Compensation | 5. | | |
| 6. Monthly Unemployment Compensation | 6. | | |
| 7. Monthly pension, retirement, or annuity payments | 7. | | |
| 8. Monthly Social Security benefits | 8. | | |
| 9. Monthly alimony actually received | 9. | | |
| 9a. From this case: | | \$ | _____ |
| 9b. From other case(s): | | _____ | Add 9a and 9b |
| 10. Monthly interest and dividends | 10. | | |
| 11. Monthly rental income (gross receipts minus ordinary and necessary expenses required to produce income) (<input type="checkbox"/> Attach sheet itemizing such income and expense items.) (income only) | 11. | 83.00 | <i>market rent</i> |
| 12. Monthly income from royalties, trusts, or estates | 12. | | |
| 13. Monthly reimbursed expenses and in-kind payments to the extent that they reduce personal living expenses | 13. | | |
| 14. Monthly gains derived from dealing in property (not including nonrecurring gains) | 14. | | |
| 15. Any other income of a recurring nature (list source) | 15. | | |
| 16. | 16. | | |

17. PRESENT MONTHLY GROSS INCOME

TOTAL: 17. \$ 1,562.00

PRESENT MONTHLY DEDUCTIONS:

- | | | | |
|--|-----|-------|--------------------|
| 18. Monthly federal, state, and local income tax (corrected for filing status and allowable dependents and income tax liabilities) | 18. | \$ | 80.00 |
| a. Filing Status <u>Single</u> | | | |
| b. Number of dependents claimed <u>1</u> | | | |
| 19. Monthly FICA or self-employment taxes | 19. | | 78.00 |
| 20. Monthly Medicare payments | 20. | | 18.00 |
| 21. Monthly mandatory union dues | 21. | | |
| 22. Monthly mandatory retirement payments | 22. | | |
| 23. Monthly health insurance payments (including dental insurance), excluding portion paid for any minor children of this relationship | 23. | | 185.00 |
| 24. Monthly court-ordered child support actually paid for children from another relationship | 24. | | |
| 25. Monthly court-ordered alimony actually paid | 25. | | |
| 25a. from this case: | | \$ | _____ |
| 25b. from other case(s): | | _____ | Add 25a and 25b |
| 26. TOTAL DEDUCTIONS ALLOWABLE UNDER SECTION 61.30, FLORIDA STATUTES (Add lines 18 through 25) | 26. | | \$361.00 |
| 27. PRESENT NET MONTHLY INCOME (Subtract line 26 from line 17) | 27. | | <u>\$ 1,201.00</u> |

SECTION II. AVERAGE MONTHLY EXPENSES

A. HOUSEHOLD:

Mortgage or rent	\$	395.00
Property taxes	\$	342.00
Electric	\$	65.00
Water, garbage & sewer	\$	75.00
Telephone	\$	30.00
Food	\$	190.00
Meals outside home	\$	15.00
Maintenance/Repairs	\$	461.00
Lawn & pool care	\$	
Pest control	\$	
Miscellaneous household	\$	
Cable television	\$	
Other:	\$	
Stamps, UPS, etc.	\$	15.00 <i>180/yr</i>
_____	\$	
_____	\$	
_____	\$	

B. AUTOMOBILE

Gasoline	\$	77.00
Oil	\$	13.00
Repairs	\$	96.00
Insurance	\$	62.00
Auto payment	\$	
Other: license & reg.	\$	4.00

C. CHILD(REN)'S EXPENSES

Day care	\$	
Nursery	\$	
School tuition	\$	
School supplies	\$	
Lunch money	\$	
After school activities	\$	
Clothing	\$	
Grooming	\$	
Gifts for holidays	\$	
Medical/dental (uninsured)	\$	
Orthodontist	\$	
Entertainment	\$	
Birthday parties	\$	
Gifts from children to others	\$	
Allowance	\$	
Other:	\$	
_____	\$	
_____	\$	
_____	\$	
_____	\$	
_____	\$	

D. INSURANCE

Medical/dental	\$	
Child(ren)'s medical/dental	\$	
Life	\$	
Ins 4401 Saturn	\$	33.50
_____	\$	
_____	\$	

E. OTHER EXPENSES NOT LISTED ABOVE

Affiant's Clothing	\$	15.00
Dry cleaning & laundry	\$	5.00
Cosmetics & toiletries	\$	10.00
Medical/Dental (uninsured)	\$	127.00
Grooming	\$	10.00
Entertainment	\$	10.00
Gifts	\$	50.00 <i>600/yr</i>
Church/Charities	\$	20.00
Miscellaneous	\$	
Pets	\$	
Dues	\$	18.00
Publications	\$	
Vacations	\$	40.00
Other: _____	\$	

F. PAYMENTS TO CREDITORS

CREDITOR:		MONTHLY PAYMENT
_____	\$	
_____	\$	
_____	\$	
_____	\$	
_____	\$	
_____	\$	
_____	\$	
_____	\$	
_____	\$	

G. SATURN

Mortgage	\$	346.00
Taxes	\$	162.00
Roof Loan	\$	425.00
Electric	\$	14.00
Water	\$	11.00

28. TOTAL MONTHLY EXPENSES (add ALL monthly amounts in A through F above) \$ 3,136.50

SUMMARY

29. TOTAL PRESENT MONTHLY NET INCOME 29. \$ 1,201.00
(from line 27 of SECTION I. INCOME)

30. TOTAL MONTHLY EXPENSES (from line 28 above) 30. \$ 3,136.50

31. SURPLUS (If line 29 is more than line 30, subtract line 30 from line 29. 31. \$
This is the amount of your surplus. Enter that amount here.)

32. (DEFICIT) (If line 30 is more than line 29, subtract line 29 from line 30. 32. (\$ 1,935.50)
This is the amount of your deficit. Enter that amount here.)

SECTION III: ASSETS AND LIABILITIES

A. ASSETS:

DESCRIPTION OF ITEM(S). List a description of each separate item owned by you (and/or your spouse, if this is a petition for dissolution of marriage).	Current Fair Market Value	Nonmarital (✓ correct column)	
		husband	wife
<input type="checkbox"/> Cash (on hand)	\$ 10.		
<input type="checkbox"/> Cash (in banks or credit unions)	4,499.		
<input type="checkbox"/> Stocks, Bonds, Notes: Banc of America 6/30/03	2,547.		
American Funds 3/31/03	1,128.		
<input type="checkbox"/> Real estate: (Home) Almeria	187,500.	381,565	
<input type="checkbox"/> (Other) 4401 Saturn	69,562.	83,401	
<input type="checkbox"/> Automobiles 91' Toyota	1,025.	3,000	
<input type="checkbox"/> Other personal property- Household furnishings	900.		
<input type="checkbox"/> Retirement plans (Profit Sharing, Pension, IRA, 401(k)s, etc.)3/31/03	101,135.		
<input type="checkbox"/> Other 1/5th ownership parcel of land located in Okeechobee	<u>8,000.</u>	20,300	
<input type="checkbox"/>			
<input type="checkbox"/> FPL Pension	unknown	3,706	
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input checked="" type="checkbox"/> here if additional pages are attached.			
Total Assets (add column B)	\$ 376,306.		

602,191
 sheet
 (225,585)

B. LIABILITIES:

DESCRIPTION OF ITEM(S). List a description of each separate debt owed by you (and/or your spouse, if this is a petition for dissolution of marriage).	Current Amount Owed	Nonmarital (✓ correct column)	
		husband	wife
<input type="checkbox"/> Mortgages on real City of West Palm Beach Almeria	\$ 5,036.		
<input type="checkbox"/> Gold Coast Credit Union-Almeria	49,800.		
<input type="checkbox"/> Great Western-Saturn	35,000.		
<input type="checkbox"/> Charge/credit card accounts			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> Other Supplies & labor owed for repairs done to 220 Almeria Road	5,532.		
<input type="checkbox"/> Supplies and labor owed for repairs done to 4401 Saturn Road	8,598.		
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/> ✓ here if additional pages are attached.			
Total Debts (add column B)	\$103,966.		

C. CONTINGENT ASSETS AND LIABILITIES

Contingent Assets		Possible Value	Nonmarital (✓ correct column)	
✓ the box next to any contingent asset(s) which you are requesting the judge award to you.			husband	wife
<input type="checkbox"/>		\$		
<input type="checkbox"/>				
Total Contingent Assets		\$ _____		

Contingent Liabilities		Possible Amount Owed	Nonmarital (✓ correct column)	
✓ the box next to any contingent debt(s) for which you believe you should be responsible.			husband	wife
<input type="checkbox"/>		\$		
<input type="checkbox"/>				
Total Contingent Liabilities		\$ _____		

SECTION IV: CHILD SUPPORT GUIDELINES WORKSHEET

[✓ one only]

- A Child Support Guidelines Worksheet IS being filed in this case. The parties have one or more minor children in common or one of the parties is requesting a modification of a previous court order regarding child support.
- A Child Support Guidelines Worksheet IS NOT being filed in this case. There are no minor children common to the parties in this case or, if this case involves a modification of a previous court order, child support is not an issue.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

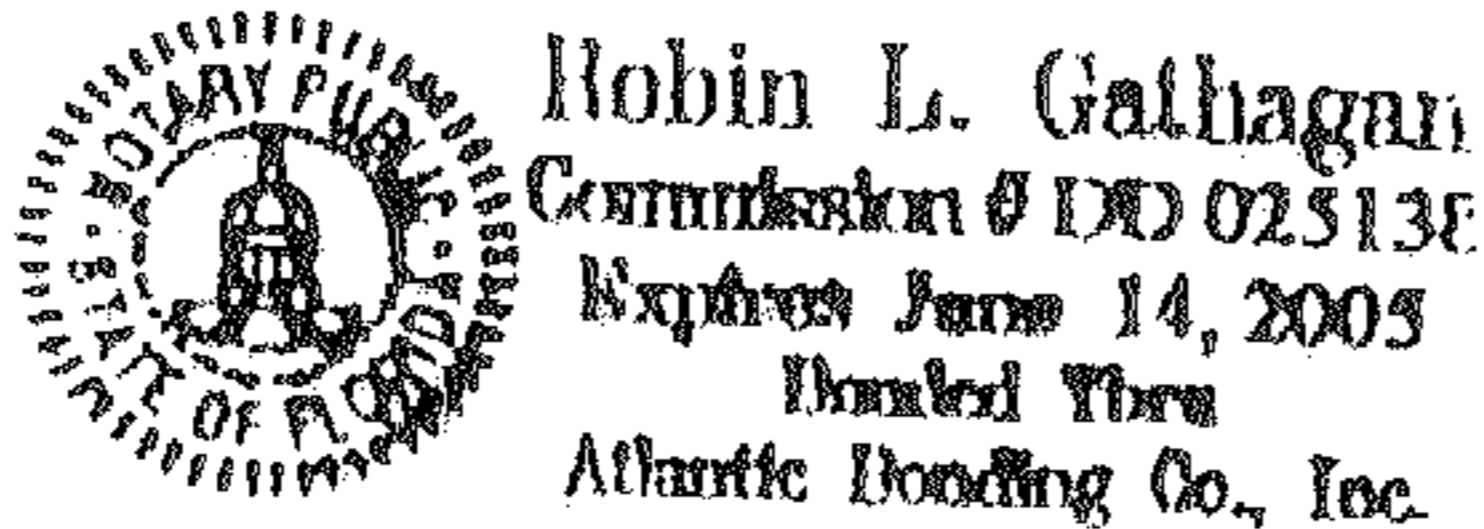
Dated: 8/17/03

Sharon Ann Mayo
SHARON ANN MAYO

STATE OF FLORIDA
COUNTY OF PALM BEACH

Sworn to or affirmed and signed before me this 14th day of August, 2003, by SHARON ANN MAYO, who is:
 personally known to me or
 who produced identification of _____

Robin L. Gathagan
NOTARY PUBLIC—STATE OF FLORIDA
AT LARGE.



My Commission expires:

I HEREBY CERTIFY that a true copy of the foregoing has been furnished to Mr. William A. Cabana, 1050 Capri Isles, Apt. F105, Venice, FL 34292, on this 15th day of August, 2003.

RENICK & KAMBER
Attorneys for Former Wife
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Lake Worth, FL 33460
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By: Cathy L. Kamber
Cathy L. Kamber
Fla. Bar No: 312819