IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF CROOK

State of Oregon)
County of Crook)

AFFIDAVIT OF INCOME AND ASSETS
Request for Payment Schedule and Agreement

Last name First name Middle name Date of Birth

Address City State Zip

Mailing Address – If different from above City State Zip

Telephone number(s) Social Security Number Driver's License Number & State

EMPLOYMENT AND INCOME:

Current Employer Address Telephone Number

I am paid on the _____ day(s) each month. Monthly wage is $_____ Employed since: _____
If unemployed, how long since last employment: _____

***OTHER INCOME** for you and spouse, dependents or household members; example: Social Security, unemployment, retirement, public assistance, child support, workers' compensation, disability, etc.:

Source of income-DESCRIBE:	Amount	How long received	How often received
	$		
	$		
	$		

Name of Bank and checking account number(s): _____

Are you buying your home? ❑ Yes ❑ No

MONTHLY INCOME	YOUR INCOME	*OTHER INCOME	MONTHLY EXPENSES	
Net earnings	$	$	Rent/Mortgage	$
Unemployment	$	$	Food	$
Food Stamps	$	$	Utilities/phone	$
Public Assistance	$	$	Car Insurance	$
Social Security	$	$	Child Support	$
Other	$	$	Medical Costs	$
Other	$	$	Court Fees	$
TOTAL INCOME	**$**	**$**	**TOTAL EXPENSES**	**$**

PAYMENT AGREEMENT TERMS AND CONDITIONS

I am asking for a delay in the initiation of collection proceedings. I understand that the monetary judgment is due on the date it is imposed on me. I cannot pay the full amount now without causing substantial hardship to myself or my dependent family. I affirm the information contained in this affidavit is true and I ask the Court to use this information to decide whether or not I qualify for an intended payment schedule, I understand that the information will be verified, and I agree to cooperate in the process. I understand that the information on this form may be given to the District Attorney. I am voluntarily providing my social security number. I understand that I cannot be compelled to provide it, nor be denied consideration solely for failing to provide it. It may be used to verify my identification, credit and employment information, and used for collection purposes for any court-imposed monetary obligation.

I agree to pay $_____ today, and $_____ per month beginning on _____ and the _____ day of each month thereafter. (Date selected is the date payment must be processed by our office. If the date falls on a holiday or weekend, it must be paid the working day prior as there is NO GRACE PERIOD.) **NOTE: Standard payment plan terms are for 90 days.**

I agree to abide by the terms of this payment agreement. I understand that the Court does not send bills and that I must make my payments as agreed. I agree to keep the Court informed of any change in my address, telephone number, employment and financial status. I understand that if I do not comply with this agreement, the Court may take one or more of the following actions:

The agreement for delay in collection proceedings may be revoked.
If this is a traffic crime, my driver's license may be sanction.
My account may be referred to the Oregon Department of Revenue for collection or to a private collection agency.
My wages may be garnished.
I may be required to appear in Court to show cause why I should not be found in Contempt of Court for, or in violation of, my probation/diversion for non-payment.

RELEASE OF INFORMATION

I understand that the Court verifies my employment and financial information to determine my eligibility for a delay in collection proceedings. I understand that some of the information necessary for this verification is contained in records that may be protected by federal and state law. Because of this, I have signed the releases below, which allow public and private organizations and individuals to provide the Court with requested information. I understand that organizations and individuals the Court may contact include, but are not limited to:

Social Security Administration	Adult and Family Services	Employers
Department of Motor Vehicles	Credit Card Holders	Landlords
Oregon Department of Revenue	Employment Divisions	Mortgage Holders
Banks/Credit Unions/Savings & Loan	Credit Reporting Bureaus	

Oregon Law requires an addition of $50 (for amounts owing under $150), $125 (for amounts owing between $150-$399) or $200 (for amounts owing of $400 or more) to any judgment that includes a monetary obligation that the Court is charged with collecting when the defendant is given over 30 days in which to pay after the financial obligation is imposed.

Date: _____ Signature: _____

Subscribed & sworn to before me this _____ day of _____, 200___.

_____
Court Clerk / Notary Public

Release of Information – Employment Division

Name: _____ Social Security Number: _____ Date of Birth: _____

I authorize the Employment Division, State of Oregon, to release to the Collections Department, Crook County Circuit Court, information from my records on file with the Employment Division. I understand that this authorization will be in effect until cancelled in writing by me. A photocopy of my signature is as valid as the original.

Date: _____ Release of Information Signature: _____

Crook County Circuit Court, 300 NE Third Street, Prineville, OR 97754