## **INCOME CONTRIBUTION AFFIDAVIT**

NAME OF DEBTOR(S) :

CHAPTER 13 CASE # :

I, \_\_\_\_\_, the person whose name is signed below, hereby swear/affirm that the following are true and correct:

1. The debtor(s) named above is/are \_\_\_\_\_.

2. I will contribute financial support in the amount of \_\_\_\_\_\_ on a monthly basis to the debtor(s).

3. My source of income is \_\_\_\_\_.

4. I will contribute to make such contributions to the Debtor(s) for the entire duration of the Chapter 13 plan of the debtor(s).

Date:

Affiant/contributor (signature)

Affiant/contributor (print name)

Sworn to or affirmed and subscribed to before me by

\_\_\_\_\_ the Affiant/Contributor identified above, on this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_\_.

Notary Public