## Form 1.977 Fact Information Sheet

## (a) For Individuals. (CAPTION) FACT INFORMATION SHEET Full Legal Name: Nicknames or Aliases: Residence Address: Mailing Address (if different): Telephone Numbers: (Home) (Business) Name of Employer: Address of Employer: Position or Job Description: Rate of Pay: \$ Average Paycheck: \$ per per Average Commissions or Bonuses: \$ per Commissions or bonuses are based on Other Personal Income: \$ from (Explain details on the back of this sheet or an additional sheet if necessary.) Social Security Number: Birthdate: Driver's License Number: Marital Status: Spouse's Name:

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Spouse Related Portion			
Spouse's Address (if different):			
Spouse's Social Security Number:	В	Sirthdate:	
Spouse's Employer:			
Spouse's Average Paycheck or Income: \$	per		
Other Family Income: \$ per (Explanecessary.)	ain details on bac	ck of this sheet or an a	additional sheet if
Describe all other accounts or investre savings bonds, or annuities, on the back	5	· ·	
*****			
Names and Ages of All Your Children (an	d addresses if no	t living with you):	
Child Support or Alimony Paid: \$	per		
Names of Others You Live With:			
Who is Head of Your Household? Person	You	Spouse	Other
Checking Account at:	Account #		
Savings Account at:	Account #		
For Real Estate (land) You Own or Are Br	uying:		
Address:			
All Names on Title:			
Mortgage Owed to:			
Balance Owed:			
Monthly Payment: \$			
(Attach a copy of the deed or mortgage, of this sheet or an additional sheet if neo	_		- •

property you own or are buying.)

For All Motor Vehicles You	Own or Are Buying:
Year/Make/Model:	Color:

Vehicle ID #: Tag No: Mileage:

Names on Title: Present Value: \$

Loan Owed to:

Balance on Loan: \$

Monthly Payment: \$

(List all other automobiles, as well as other vehicles, such as boats, motorcycles, bicycles, or aircraft, on the back of this sheet or an additional sheet if necessary.)

Have you given, sold, loaned, or transferred any real or personal property worth more than \$100 to any person in the last year? If your answer is "yes," describe the property, market value, and sale price, and give the name and address of the person who received the property.

Does anyone owe you money? Amount Owed: \$

Name and Address of Person Owing Money:

Reason money is owed:

Please attach copies of the following:

- 1. Your last pay stub.
- 2. Your last 3 statements for each bank, savings, credit union, or other financial account.
- 3. Your motor vehicle registrations and titles.
- 4. Any deeds or titles to any real or personal property you own or are buying, or leases to property you are renting.
- 5. Your financial statements, loan applications, or lists of assets and liabilities submitted to any person or entity within the last 3 years.
- 6. Your last 2 income tax returns filed.

UNDER PENALTY OF PERJURY, I SWEAR OR AFFIRM THAT THE FOREGOING ANSWERS ARE

TRUE AND COMPLETE.	
Judgment Debtor	
STATE OF FLORIDA	
COUNTY OF	
Sworn to (or affirmed) and subscribed before person making statement)	ore me this day of (year) by (name of
	Notary Public of Florida
	My Commission expires:
	OMPLETED FORM, WITH ALL ATTACHMENTS, E JUDGMENT CREDITOR'S ATTORNEY, BUT DO
(b) For Corporations and Other Busines	s Entities.
(CAPTION)	
FACT INFORMATION SHEET	
Name of entity:	
Name and title of person filling out this form	n:
Telephone number:	
Place of business:	

Gross/taxable income reported for federal income tax purposes last three years:						
\$	/\$	\$ /\$	8	\$	/\$	
Taxpayer iden	tification num	oer:				
Is this entity a	n S corporatio	n for federal inco	me tax purp	ooses? ———	Yes	No
Average numb	er of employe	es per month				
		member, or par ner equity interes		g 5% or mor	re of the entity	7's common
Names of office	cers, directors,	members, or par	tners:			
Checking acco	ount at:		Accour	nt#		
Savings accou	nt at:		Account #			
Does the entit	y own any veh	icles?	Yes	No		
For each vehic	cle please state	):				
Year/Make/Mo	odel:	Cole	or:			
Vehicle ID No	:	Tag No:		Mileage:		
Names on Titl	e:		Prese	nt Value: \$		
Loan Owed to	:					
Balance on Lo	an: \$					
Monthly Paym	ent: \$					
Does the entit	y own any real	property?	Ye	es .	No	
If yes, please s	state the addre	ess(es):				
Please check i	f the entity ow	ns the following				

Mailing address (if different):

- 1. Boat
- 2. Camper
- 3. Stocks/bonds
- 4. Other real property
- 5. Other personal property

Please attach copies of the following:

- 1. Copies of state and federal income tax returns for the past 3 years.
- 2. All bank, savings and loan, and other account books and statements for accounts in institutions in which the entity had any legal or equitable interest for the past 3 years.
- 3. All canceled checks for the 12 months immediately preceding the service date of this Fact Information Sheet for accounts in which the entity held any legal or equitable interest.
- 4. All deeds, leases, mortgages, or other written instruments evidencing any interest in or ownership of real property at any time within the 12 months immediately preceding the date this lawsuit was filed.
- 5. Bills of sale or other written evidence of the gift, sale, purchase, or other transfer of any personal or real property to or from the entity within the 12 months immediately preceding the date this lawsuit was filed.
- 6. Motor vehicle or vessel documents, including titles and registrations relating to any motor vehicles or vessels owned by the entity alone or with others.

- 7. Financial statements as to the entity's assets, liabilities, and owner's equity prepared within the 12 months immediately preceding the service date of this Fact Information Sheet.
- 8. Minutes of all meetings of the entity's members, partners, shareholders, or board of directors held within 2 years of the service date of this Fact Information Sheet.
- 9. Resolutions of the entity's members, partners, shareholders, or board of directors passed within 2 years of the service date of this Fact Information Sheet.

UNDER PENALTY OF PERJURY, I SWEAR OR AFFIRM THAT THE FOREGOING ANSWERS ARE TRUE AND COMPLETE.

Judgment Debtor's Designated
Representative/Title
STATE OF FLORIDA
COUNTY OF
Sworn to (or affirmed) and subscribed before me this day of (year) by (name of person making statement).
Personally known OR Produced identification
Type of identification produced

YOU MUST MAIL OR DELIVER THIS COMPLETED FORM, WITH ALL ATTACHMENTS, TO THE PLAINTIFF'S JUDGMENT CREDITOR OR THE PLAINTIFF'S JUDGMENT CREDITOR'S ATTORNEY, BUT DO NOT FILE THIS FORM WITH THE CLERK OF THE COURT.