



**AFFIDAVIT OF SEPARATION**

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

Responsible party name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Account number: \_\_\_\_\_

I hereby depose and state that I have been separated from my spouse \_\_\_\_\_

(name)

since \_\_\_\_\_. Since that time, we have maintained and resided in separate households.

(date)

We have no financial ties whatsoever:

\_\_\_\_ I have no joint bank accounts with my estranged spouse.

\_\_\_\_ We do not share a lease or have joint property.

\_\_\_\_ We have not filed a joint income tax return since \_\_\_\_\_.

\_\_\_\_ I receive no monetary spousal support.

\_\_\_\_ I have attached a copy of my last income tax return.

\_\_\_\_ I have not attached a copy of my last income tax return because I have not filed income taxes for the following years \_\_\_\_\_.

My reason for not filing income tax returns is because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I attest that the foregoing information is true and correct to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_