

FINANCIAL AFFIDAVIT IN SUPPORT OF MOTION

I, _____, being first duly sworn, state as follows:

1. I am filing this Financial Affidavit in support of the following motion:

Motion to Waive/Defer Filing Fees

Motion for Service by Publication by Posting and Mail Under Civ. Rule 4.4(A)(2)

Motion for Payment from Guardian Ad Litem Fund

2. I receive \$_____ per month in income or other benefits for a household of _____.

3. The following is my additional financial information:

(a) Other persons living in my household are as follows:

Name	Age	Relationship (Spouse/Child/Other)	Income (if adult)

(b) Receipt of public assistance:

I receive needs-based, means-tested public assistance: Yes No

If yes, I receive the following type and amount: _____

(Examples: TANF, SSI, SSD, Medicaid, Food Stamps, means-tested Veterans' Benefits)

(c) Employment information:

Place of current/last employment: _____

Length of time employed: from _____ to _____

Gross monthly income from employment: _____

(d) Total gross income from any sources other than employment in the

last 26 weeks: _____ (Including Unemployment, Worker's Compensation, child support, spousal support and other types of income)

(e) Any other monthly household income (list source and amount):

(f) Total Household Income: _____

[Including your own income as well as all sources of income for all household members as set forth in the answers provided in response to paragraphs 2 and 3(a)-(e).]

(g) I have the following financial resources:

Total assets: _____ Cash on hand or on deposit: _____

I own real estate: Yes No If yes, fair market value: _____

I own an automobile: Yes No If yes, fair market value: _____

(h) My basic monthly living expenses are as follows:

Food: _____ Housing: _____ Utilities: _____

Medical expenses: _____ Transportation: _____

Child support paid: _____ Childcare (if working): _____

Other (specify): _____

(i) I have the following limitations that impact my ability to secure work, such as disability, homelessness, lack of driving privileges, etc: _____

4. I am without funds/assets to pay the above-referenced fees/costs/deposit at this time.
5. I would be deprived of the necessities of life in order to pay the above-referenced fees/costs/deposit at the time.
6. I understand that I must inform the court if my financial situation should change before the disposition of my case.
7. I understand that I am subject to criminal charges for providing false information.
8. If my motion is seeking to waive or defer the filing fees, I understand that this is waiver or deferment of the cost deposit but that the court costs are to be paid in this case as further ordered by the Court and if this Court should deny my motion, I must pay the filing fees within thirty (30) days or my complaint/motion will be dismissed.
9. If my motion is seeking to have my share of the Guardian Ad Litem fees waived, I understand that if it is subsequently determined by the Court that I was not entitled to my share of the Guardian Ad Litem fees to be paid from the Court fund, I may be required to reimburse the Court fund immediately.
10. I hereby represent that the information set forth above regarding my financial condition is true and complete to best of my knowledge, information and belief.

SIGNATURE

Sworn to and subscribed before me this _____ day of _____, 20__.

NOTARY PUBLIC