

INSTRUCTIONS TO APPLICANT
 1. Print or type all information requested.
 2. Sign the Financial Affidavit section in front of a court clerk, a notary public or an attorney.
 3. Bring this form to the superior court where your case will be filed or is pending.
 4. If your application for fees payable to the court or for costs of service of process is denied, you may request a hearing on the application.

INSTRUCTIONS TO CLERK
 1. Bring completed form to a judge or, if applicable, to a family support magistrate.
 2. If the application is granted, notify the applicant and counsel, if appointed.
 3. If the application for fees payable to the court or for costs of service of process is denied, and upon the request of the applicant, schedule a hearing on the application.

TO: THE SUPERIOR COURT

NAME OF APPLICANT (Last, first, middle initial)	ADDRESS OF APPLICANT (No., street, town, state and zip)	TELEPHONE (Area code first)
-------------------------------------------------	---------------------------------------------------------	-----------------------------

NAME OF CASE	DOCKET NO. (If applicable)
--------------	----------------------------

<input type="checkbox"/> Judicial District <input type="checkbox"/> Housing Session <input type="checkbox"/> G.A. No. _____	ADDRESS OF COURT
-----------------------------------------------------------------------------------------------------------------------------	------------------

TYPE OF PROCEEDING

<input type="checkbox"/> CONTEMPT	<input type="checkbox"/> APPLICATION FOR RELIEF FROM ABUSE	<input type="checkbox"/> PATERNITY
<input type="checkbox"/> DISSOLUTION OF MARRIAGE/DIVORCE	<input type="checkbox"/> MOTION TO OPEN OR MODIFY	<input type="checkbox"/> OTHER (Specify): _____
<input type="checkbox"/> HOUSING	<input type="checkbox"/> CIVIL	

FEE WAIVER

I request that the court waive or have the State pay the fees indicated below. ("X" all that apply)

ENTRY FEE
 FILING FEE
 SHERIFF'S FEE
 OTHER (Specify): _____

APPOINTMENT OF COUNSEL

(Applicable only in a contempt proceeding or to the putative father in a paternity proceeding.)

I request that the court appoint counsel to represent me.

FINANCIAL AFFIDAVIT

I. DEPENDENTS

Total No. of Dependents (not including yourself)....

II. MONTHLY INCOME

A. Gross monthly income (before deductions).....	<input style="width: 100%;" type="text"/>
B. Net monthly income after taxes from monthly employment.....	<input style="width: 100%;" type="text"/>
C. Other income (i.e., TANF, Social Security, etc.) (Specify source).....	<input style="width: 100%;" type="text"/>
SOURCE: _____	
TOTAL MONTHLY INCOME (B+C)	<input style="width: 100%;" type="text"/>

III. MONTHLY EXPENSES

A. Rent/Mortgage.....	<input style="width: 100%;" type="text"/>
B. Real Estate Taxes.....	<input style="width: 100%;" type="text"/>
C. Utilities (Telephone, heat, electric, water, gas, etc.).....	<input style="width: 100%;" type="text"/>
D. Food.....	<input style="width: 100%;" type="text"/>
E. Clothing.....	<input style="width: 100%;" type="text"/>
F. Insurance Premiums (Med./Dental, Auto, Life, Home).....	<input style="width: 100%;" type="text"/>
G. Medical/Dental.....	<input style="width: 100%;" type="text"/>
H. Transportation.....	<input style="width: 100%;" type="text"/>
I. Child Care.....	<input style="width: 100%;" type="text"/>
J. Other (Specify): _____	<input style="width: 100%;" type="text"/>
TOTAL MONTHLY EXPENSES	<input style="width: 100%;" type="text"/>

IV. ASSETS

ESTIMATED VALUE	LOAN BALANCE	EQUITY
A. Real Estate.....	<input style="width: 100%;" type="text"/>	REAL ESTATE
B. Motor Vehicles	<input style="width: 100%;" type="text"/>	MOTOR VEHICLE
C. Other Personal Property.....	<input style="width: 100%;" type="text"/>	OTHER PROPERTY
D. Savings Account Balance (Total of all accounts).....	<input style="width: 100%;" type="text"/>	SAVINGS
E. Checking Account Balance (Total of all accounts).....	<input style="width: 100%;" type="text"/>	CHECKING
F. Other Assets (Specify):.....	<input style="width: 100%;" type="text"/>	OTHER ASSETS
TOTAL ASSETS		<input style="width: 100%;" type="text"/>

V. LIABILITIES/DEBTS (Do not include mortgage or loan balances that are listed under "Assets".)

TYPE OF DEBT	AMOUNT OWED	MONTHLY PAYMENT
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
TOTAL LIABILITIES		<input style="width: 100%;" type="text"/>

