
VERSUS

NUMBER: _____

29th JUDICIAL DISTRICT COURT
PARISH OF ST. CHARLES
STATE OF LOUISIANA
DIVISION: _____

IN FORMA PAUPERIS AFFIDAVIT

Note: Answer all questions in full. If you seek protection from abuse do not answer questions 2 and 3.

1. Full Name: _____

Soc. Sec. No.: _____ Date of Birth: _____ Age: ____ Sex: ____
Month Day Year

2. Address: _____
Box Number or Street Address City and State Zip Code

3. Telephone Number(s): _____
HOME WORK

4. Are you a student? ____ YES ____ NO If YES, state the name of the school you attend:
Enrollment Status: _____

5. Current Household Information:

Single: ____ Married: ____ Separated: ____ Divorced: ____ Widowed: ____ Intimate Partner: ____

How many children under 18 do you support? _____

How many children live with you? _____ Do you have any other dependents? _____

State the Name, Age and Relationship to you of each child and dependent counted above:

NAME	AGE	RELATIONSHIP

6. Are you employed: ____ YES ____ NO If you are employed, complete the following:

Name of employer: _____

Address: _____
Street Address City and State Zip Code

Phone: _____ How long have you been employed? _____

If you are not employed, complete the following:

Name of Last employer: _____

Address: _____
Street Address City and State Zip Code

Phone: _____ How long have you been unemployed? _____

What were your monthly wages? _____

7. Income:

(a) State how you are paid and the amount of your gross earned income from wages:

Weekly ____ Bi-weekly ____ Monthly ____ Total amount per month \$ _____

(b) Apart from income received from sources listed in question 8(b), how much other income do you receive on a monthly basis? Other Income \$ _____

(c) Monthly Deductions: Income Tax: \$ _____ FICA: \$ _____

(d) Other deductions: \$ _____

(explain) _____

Total Deductions \$ _____

Add 7(a) and 7(b), then subtract 7(c) for **TOTAL NET MONTHLY INCOME** \$ _____

8. Spouse's Income: (Answer if you are married and living with a spouse.)

Is your spouse employed? _____ What is your spouse's occupation? _____

Name of Employer _____

Address: _____
 Street Address City and State Zip Code

Phone Number: _____ How long has spouse been employed? _____

9. Other Income or Support:

Please mark a check if you or your spouse receives any of the following and state the amount:

<u>SOURCE</u>	<u>YOU</u>	<u>SPOUSE</u>	<u>MONTHLY AMOUNT</u>
SSI	_____	_____	\$ _____
DISABILITY	_____	_____	\$ _____
WORKER'S COMP	_____	_____	\$ _____
UNEMPLOYMENT BENEFITS	_____	_____	\$ _____
FOOD STAMPS	_____	_____	\$ _____
TANF	_____	_____	\$ _____
CHILD SUPPORT	_____	_____	\$ _____
SPOUSAL SUPPORT	_____	_____	\$ _____
KINSHIP CARE GRANT	_____	_____	\$ _____
OTHER	_____	_____	\$ _____

If you are a client of a legal services program funded by the Legal Service Corporation, or a Pro Bono Project that receives referrals from a legal services program, and have a combined income from questions 7, 8 and 9 that is less than or equal to 125% of the federal poverty level, skip all parts of question 10 and continue with question 11 on the next page.

10. Property, Assets and Debts:

A. If you own any of the following, please state the value and the balance owed:

<u>PROPERTY</u>	<u>VALUE</u>	<u>BALANCED OWED</u>
HOUSE	\$ _____	\$ _____
AUTOMOBILE	\$ _____	\$ _____
TRUCK	\$ _____	\$ _____
WATERCRAFT	\$ _____	\$ _____
LIVESTOCK	\$ _____	\$ _____
MACHINERY	\$ _____	\$ _____
STOCKS	\$ _____	XXXXXXXXXXXXXX
BONDS	\$ _____	XXXXXXXXXXXXXX
CERTIFICATES OF DEPOSIT	\$ _____	XXXXXXXXXXXXXX

OTHER IMMOVABLE PROP. \$ _____ \$ _____
 EQUITY DEBT

CHECKING ACCOUNT \$ _____ BANK AND LOCATION _____

SAVINGS ACCOUNT \$ _____ BANK AND LOCATION _____

TOTAL VALUE OF ASSETS \$ _____

B. Expenses and Debts

(i) List your monthly expenses:

Rent: \$	Cable: \$	Car Note: \$
Lot rent: \$	Garbage: \$	Car Insurance: \$
House Note: \$	Medical Insurance: \$	Transportation: \$
House Insurance: \$	Medical Expenses: \$	Food: \$
Gas: \$	Dental Expenses: \$	Barber/Beauty: \$
Electricity: \$	Prescriptions: \$	Entertainment: \$
Water: \$	Life Insurance: \$	Grooming Supplies: \$
Telephone: \$	Daycare: \$	Garnishment: \$
Property Taxes: \$	Child Support: \$	Other: \$
Support for children other than those of current marriage: \$		

Total amount for section (i) \$ _____

(ii) List your credit cards and amount of monthly payment:

Card Name	Monthly Payment

Total amount for section (ii) \$ _____

(iii) List the financial institutions you owe for loans and the amount of monthly payment.

Financial Institution	Monthly Payment

Total amount for section (iii) \$ _____

TOTAL MONTHLY EXPENSES \$ _____
 (Add 10 B (i), (ii) and (iii).)

11. Does anyone regularly help you pay your expenses? _____ YES _____ NO
 (a) If yes, state that person's name and relationship to you:

NAME _____ RELATIONSHIP _____

(b) Do you have any additional income or assets not shown above: _____ YES _____ NO

EXPLAIN: _____

12. If you have an attorney, what arrangements have you made to pay your attorney's fee? What amount, if any, have you paid?

13. Has your attorney or the Notary Public told you that you may go to jail if you intentionally give a false answer to any of the above questions? _____ YES _____ NO

MOVER'S AFFIDAVIT

STATE OF LOUISIANA
PARISH OF ST. CHARLES

BEFORE ME, the undersigned authority, personally came and appeared:

who after being duly sworn, deposed and said:

1. He/She provided the information above; that the information is furnished to the court for the purpose of requesting permission to litigate the above-captioned lawsuit without paying the costs in advance or as they accrue or furnishing security therefore.
2. That the above information is a true and correct statement of his/her financial condition.
3. That the pleading and all allegations of fact therein are true and correct; and that because of his/her poverty and want of means, he/she is unable to pay the costs of court in advance or as they accrue, nor is he/she able to provide security therefor.
4. He/She has read and understands the privilege contained in the notice below.

NOTICE

Although you may be granted the privilege of proceeding without prepayment of costs, ***SHOULD JUDGMENT BE RENDERED AGAINST YOU, YOUR STATUS AS A PAUPER DOES NOT RELIEVE YOU OF THE OBLIGATION TO PAY THESE COSTS.***

The privilege to proceed *IN FORMA PAUPERIS* is restricted to litigants who are clearly entitled to do so, with due regard to the nature of the proceeding, the court costs which otherwise would have to be paid, and the ability of the litigant to pay them or to furnish security therefor, so that the indiscriminate filing of lawsuits may be discouraged, without depriving a litigant of the benefit of proceeding *in forma pauperis* if he/she is entitled to do so.

MOVER'S SIGNATURE

SWORN TO AND SUBSCRIBED BEFORE ME, a Notary Public in Hahnville, Louisiana, this _____ day of _____, 20__.

NOTARY PUBLIC

THIRD PARTY AFFIDAVIT

STATE OF LOUISIANA
PARISH OF ST. CHARLES

BEFORE ME, personally came and appeared _____ who after being sworn, deposed and said that he/she knows _____ well, and that he/she knows that because of his/her poverty and want of means, he/she is unable to pay the costs of court in advance or as they accrue, nor is he/she able to provide bond therefor.

THIRD PARTY'S SIGNATURE

SWORN TO AND SUBSCRIBED BEFORE ME, a Notary Public in Hahnville, Louisiana, this _____ day of _____, 20__.

NOTARY PUBLIC

LEGAL SERVICE PROGRAMS' DECLARATION

I ATTEST that I am a duly authorized representative of a Legal Services Program funded by the Legal Service Corporation or a Pro Bono Project that receives referrals from one of these Legal Service Programs, and that _____ has produced evidence that he/she receives public assistance benefits, or that he/she has qualified to receive free legal services based on his/her income being less than or equal to 125% of the federal poverty level and therefore is entitled to a rebuttable presumption that he/she is entitled to the privilege of litigating without prior payment of costs.

PROGRAM REPRESENTATIVE

ORDER

Considering the foregoing Pleading and Affidavits,
let _____ be permitted to file all pleadings,
appear in, and prosecute or defend this action without prior payment of costs or as
they accrue, or without furnishing security therefor.

Hahnville, Louisiana, this ____ day of _____, 20__

DISTRICT JUDGE