

**In the District Court of Appeal
First District, Florida**

Petitioner

v.

Respondent

CASE NO. _____

**MOTION FOR LEAVE TO PROCEED IN FORMA
PAUPERIS/AFFIDAVIT OF INDIGENCY BY PETITIONER**

Petitioner _____, in propria persona, respectfully moves this Court for an order permitting him/her to proceed in forma pauperis. In support thereof petitioner submits the following financial affidavit of indigency.

1. **I have _____ dependents.** (Include only those persons you list on your U.S. Income tax return.)

List names and ages of dependents: _____

Are you Married?...Yes....No Does your Spouse Work?...Yes....No Annual Spouse Income? \$_____

2. **I have a net income of \$_____** paid () weekly () every two weeks () monthly () yearly () other _____.

(Net income is your total income including salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, **minus** deductions required by law and other court-ordered payments such as child support.)

3. **I have other income** paid () weekly () every two weeks () monthly () yearly () other _____.

(Circle "Yes" and fill in the amount if you have this kind of income. Otherwise circle "No". **Do not fill in blanks with "N/A".**)

Second job	Yes \$ _____	No	Veterans' benefits	Yes \$ _____	No
Social Security benefits			Workers compensation	Yes \$ _____	No
For you	Yes \$ _____	No	Income from absent family members	Yes \$ _____	No
For child(ren).....	Yes \$ _____	No	Stocks/Bonds.....	Yes \$ _____	No
Unemployment compensation	Yes \$ _____	No	Rental income	Yes \$ _____	No
Union payments.....	Yes \$ _____	No	Dividends or interest.....	Yes \$ _____	No
Retirement/pensions	Yes \$ _____	No	Other kinds of income not on the list.....	Yes \$ _____	No
Trusts	Yes \$ _____	No	Gifts.....	Yes \$ _____	No

4. **I have assets:** (Circle "yes" and fill in the value of the property. Otherwise circle "No". **Do not fill in blanks with "N/A".**)

Cash	Yes \$ _____	No	Savings account	Yes \$ _____	No
Bank account(s)	Yes \$ _____	No	Stocks/bonds.....	Yes \$ _____	No
Certificates of deposit or			Homestead Real Property*	Yes \$ _____	No
money market accounts	Yes \$ _____	No	Motor Vehicle*.....	Yes \$ _____	No
Boats*.....	Yes \$ _____	No	Non-homestead real property/real estate*	Yes \$ _____	No
			Other tangible/intangible assets.....	Yes \$ _____	No

*Show loans on these assets in paragraph 5.

Check one: I () DO () DO NOT expect to receive more assets in the near future. The asset is _____.

5. **I have total liabilities and debts of \$_____** as follows (list creditors and amount owed):

6. **If you have been convicted of a crime and are incarcerated, you must complete the questions in this paragraph and attach the required copy of your inmate trust account.**

My inmate number is: _____

List inmate's monthly expenses: _____

Amount currently held in inmate trust account: \$_____

Attach photocopy of your trust account records for the preceding six (6) months or for whole time of incarceration, whichever period is shorter.

I certify that I have _____ have not _____ been adjudicated indigent under section 57.081, 57.085 or 28 U.S.C. § 1915. If your answer is "YES" and it occurred twice in the preceding three (3) years, you are required to list each suit, action, claim, proceeding, or appeal which you have intervened in any court or other adjudicatory forum in the proceeding five years. (LIST ONLY REQUIRED IF PARTY FILING MOTION HAS BEEN ADJUDICATED INDIGENT TWICE IN THE PROCEEDING 3 YEARS.)

1. _____
2. _____
3. _____
4. _____
5. _____

Attach extra sheet(s) if necessary.

I _____ (insert name) assert that I am presently unable to pay court costs and fees, and under penalty of perjury, I swear or affirm that all statements in this affidavit are true and complete.

7. I understand that I may be required to make payments for fees and costs to the clerk in accordance with § 57.082(5) or § 57.085, Florida Statutes, as provided by law.

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under § 57.082, Florida Statutes, commits a misdemeanor of the first degree, punishable as provided in § 775.082 or § 775.083, Florida Statutes. **I attest that the information I have provided on this application is true and accurate to the best of my knowledge.**

Signed this _____ day of _____, 20____.

Signature of Applicant for Indigent Status

Print Name

Address

CERTIFICATE OF SERVICE

I certify that a copy hereof has been furnished to _____

(insert name(s) and address(es) of attorney(s) and any unrepresented party(ies) in the case) by mail/email this ____ day of _____, 20__.

Signature of Applicant for Indigent Status