

IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____,
Plaintiff,

vs.

_____,
Defendant.

*
*
* Civil Action
* File No. _____
*
*
*
*

AFFIDAVIT OF ELIGIBILITY TO PROCEED IN FORMA PAUPERIS

I, _____, swear or affirm that I am the [plaintiff/defendant] in the above-styled case and that because of my indigent status (poverty), I am unable to pay the costs of this proceeding. I further swear that the responses which I have made to questions and instructions on this statement, containing three (3) pages including this one, relating to my ability to pay the cost of proceeding in this action are true and correct.

(Sign your name here before a Notary)

Name: _____

Address: _____

Telephone Number: _____

Sworn to and affirmed before me this
_____ day of _____, _____.

Notary Public
My commission expires: _____

(Notary Seal)

****THIS PAUPER’S AFFIDAVIT MUST BE FILED IN THE CIVIL ACTION FILE LISTED ABOVE****

<u>Type of income/source</u>	<u>Amount per month</u>
1. _____	_____
2. _____	_____
3. _____	_____
	Total \$ _____

E. ASSETS

1. How much cash do you currently have available to you, including your checking and savings accounts?

<u>Name of Financial Institution</u>	<u>Last 4 digits of account number</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Amount of cash *not* in an account \$ _____

Total cash (in account and not in account) \$ _____

2. Do you own a car, truck, van or other motor vehicle? (*circle one*) Yes No

If yes, list below:

<u>Description of vehicle</u>	<u>Appropriate value of vehicle (minus amount owed)</u>
_____	_____
_____	_____
_____	_____

3. Do you own a home or other real estate? (*circle one*) Yes No

If yes, list below:

<u>Description</u>	<u>Value</u>	<u>Amount owed</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total \$ _____

F. LIABILITIES

1. List all debts owed over \$100 and all payments which you must make on a regular basis below. Include house payments, rent, child support or alimony payments, charge account payments, loan payments and any other payment which you must make on a regular basis. Do not include ordinary expenses such as food, clothing, utility bills and similar items.

<u>Source of Debt</u>	<u>Total Amt. Owed</u>	<u>Payments Per Month</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total \$ _____

2. Do you have any unusual or extraordinary expenses or circumstances such as large medical bills which are not listed above? (*circle one*) Yes No

If yes, explain below:

3. Are there any other circumstances which render you unable to pay the costs of this action and are not fully explainable above (i.e. disability, illness, etc.) (*circle one*) Yes No

If you, explain below:

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ORDER ON PROCEEDING IN FORMA PAUPERIS

Upon the affidavit of the applicant, _____, this Court finds and IT

IS ORDERED:

- The application *is* found to be sufficient and the Plaintiff *is* entitled to proceed in forma pauperis without being required to pay filing fees and copying fees, subject to later traverse by the Defendant.
- The applicant *is not* found to be indigent and *is not* entitled to proceed in forma pauperis. Applicant's request to proceed in forma pauperis is denied. Applicant is therefore responsible for all fees and costs.

SO ORDERED, this _____ day of _____, 20__.

_____, Judge
_____ County Superior Court