IN THE SUPER	STATE OF GEORGIA
Plaintiff, vs.	* * * Civil Action * File No * *
Defendant.	*
I,above-styled case and that because of my proceeding. I further swear that the response	GIBILITY TO PROCEED IN FORMA PAUPERIS
Sworn to and affirmed before me this day of	(Sign your name here before a Notary) Name: Address: Telephone Number:
Notary Public My commission expires:	

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

1. Name _____ 2. Current address _____ Street or P.O. Box ZIP County City State 3. Home Telephone Work/Other Phone 4. Marital Status (circle one) - married single B. DEPENDENTS/DEPENDENCY 1. How many people, not including yourself, do you support? _____ List below: Name Age Relationship Support totally? (circle one) yes yes no yes no yes no 2. Is there any person (parents, husband, etc.) who is under a legal duty to support you? (circle one) Yes No If yes, give the name of this person and explain. C. PUBLIC ASSISTANCE Do you currently receive either Aid to Families of Dependent Children (AFDC) or Supplements Security Income (SSI)? (circle one) Yes No *If yes, list the type of assistance and amount:* Note: if you answer "yes" to the above question, the Court may wish to verify the information you have given. Although the Court will keep this information confidential, by completing this question you authorize the release of information from the Social Security Administration and/or the Department of Family and Children Services. D. MONTHLY INCOME 1. Do you have a job or jobs? (circle one) Yes No List name and phone number(s) of employer(s), if any: Employer Phone Wages per month Per Month Total \$____ If you have a spouse or significant other that you reside with, does that person have a job or jobs? Please do not list income of anyone who is named as an opposing party in this case. (circle one) Yes No *List name and phone number(s) of employers, if any:* Employer Phone Wages per month

A. IDENTIFYING INFORMATION

Per Month Total \$_____

	2			
T. A	ASSETS		Total \$	
	How much cash do you currently have Name of Financial Institution			
	Amount of cash <i>not</i> in an account \$_ Total cash (in account and not in acc	count) \$		
2	Do you own a car, truck, van or othe If yes, list below:	er motor vehicle? (circle one) Yes	No	
	Description of vehicle		ehicle (minus amount owed)	
3	3. Do you own a home or other real est <i>If yes, list below:</i> Description	ate? (circle one) Yes No <u>Value</u>	Amount owed	
	Total \$			
	rent, child support or alimony payme	ents, charge account payments, loan of include ordinary expenses such as	a regular basis below. Include house payments and any other payment which food, clothing, utility bills and similar it Payments Per Month	you
	Total \$			
2	2. Do you have any unusual or extraord above? (circle one) Yes No If yes, explain below:	· ·	ch as large medical bills which are not lis	sted
			osts of this action and are not fully explai	

IN THE SUPERIOR COURT OF _____ COUNTY STATE OF GEORGIA Plaintiff, * Civil Action File No. _____ vs. Defendant. 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