

Form Number 3

STATE OF INDIANA) IN THE _____ SUPERIOR/CIRCUIT COURT
) SS:
COUNTY OF _____) CASE NO. _____

IN RE THE MARRIAGE OF:

Petitioner,

and

VERIFIED MOTION FOR FEE WAIVER

Respondent.

The Petitioner now states:

1. I wish to file this action and I believe that I have a case with merit.
2. I cannot pay any of the filing fees or other costs of this action because I do not have sufficient income or resources.
3. I live with _____

4. Our family's income is \$ _____ per month. **(Total from below)**
(Income received each month, before taxes)

Wages (\$ _____ per hour x _____ hours per month)	_____
Unemployment Compensation	_____
AFDC / TANF Benefits	_____
SSI / SSD Benefits	_____
Child Support	_____
Other	_____
	+
	Total = \$ _____

5. We have \$ _____ in the bank.

6. Our expenses total \$ _____ per month: **(Total from below)**
(Expenses spent each month)

Housing (Rent, Contract, or Mortgage)	_____
Utilities (Gas, Electric, Water, Phone, etc.)	_____
Food	_____
Child Care	_____
Medical Bills	_____
Transportation	_____
Insurance (car, medical and/or property)	_____
Child Support	_____
Other (please describe)	_____
	+
	Total = \$ _____

I request that this Court waive all costs of this action and allow me to proceed without the payment of any filing fees or other costs.

I affirm under the penalties of perjury that the foregoing representations are true.

Signature

Print your name

Mailing address

Town, State and Zip Code

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IN RE THE MARRIAGE OF:

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and

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ORDER ON FEE WAIVER

The Petitioner, has filed a Verified Motion for Fee Waiver, which the Court has read and finds should be granted.

IT IS THEREFORE ORDERED that Petitioner may file this case:

_____ without the pre-payment of any filing fees, costs, security, bond, or other expenses; or

_____ upon the pre-payment of \$ _____ which is a portion of the filing fee set by statute. Such sum must be paid by the Petitioner to the Clerk within the next 20 days.

The Court will determine whether any or additional costs are to be paid at a preliminary or final hearing in this case.

Date

Judge

Court

Distribution:

Your name

Your spouse's name

Your mailing address

Your spouse's mailing address

Your town, state and zip code

Your spouse's town, state and zip code