

STATE OF INDIANA )  
 )  
COUNTY OF ADAMS ) SS:

IN THE ADAMS SUPERIOR COURT  
SMALL CLAIMS DOCKET CAUSE  
NO. 01D01- -SC-

\_\_\_\_\_  
Plaintiff,

vs.

\_\_\_\_\_  
Defendant.

### VERIFIED MOTION FOR WAIVER OF FILING FEE AND COST(S)

The Petitioner states:

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

3. My income is \$ \_\_\_\_\_ per month. (**Income 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 (describe: \_\_\_\_\_) \_\_\_\_\_

= *Income Total* \_\_\_\_\_

4. My expenses total \$ \_\_\_\_\_ per month. (**Expense Total from below**)  
(Expenses each month)

Housing (Rent, Contract, or Mortgage) \_\_\_\_\_  
Utilities (Gas, Electric, Water, etc.) \_\_\_\_\_  
Food \_\_\_\_\_  
Child care \_\_\_\_\_  
Medical costs \_\_\_\_\_  
Transportation \_\_\_\_\_  
Insurance (medical, car, and/or \_\_\_\_\_  
property) Child support \_\_\_\_\_  
Other (describe: \_\_\_\_\_) \_\_\_\_\_

= *Expense Total* \_\_\_\_\_

**CONTINUE TO NEXT PAGE**

5. My assets total \$ \_\_\_\_\_. (*Asset Total from below*)

I have \$ \_\_\_\_\_ in the bank.

This real estate is titled in my name and worth:

A. \_\_\_\_\_

B. \_\_\_\_\_

Other property that I own that is valued at over \$500 (E.g., car) :

A. \_\_\_\_\_

B. \_\_\_\_\_

= *Asset Total* \_\_\_\_\_

6. I am being represented by an attorney of an organization (such as Indiana Legal Services, Inc. or Volunteer Lawyer's Project) that uses generally accepted standards of poverty to determine eligibility for its services.

The organization is: \_\_\_\_\_ .

I request that this Court waive all or part of the filing fee and other cost(s), and allow me to proceed with this action.

I affirm under the penalties of perjury of the State of Indiana that the above statements are true and accurate.

\_\_\_\_\_  
Signature of Party