

NON-REMOVABLE MILLE LACS BAND OF CHIPPEWA INDIANS

IN THE COURT OF CENTRAL JURISDICTION

Plaintiff,

Vs.

Case No. _____

Defendant(s).

**Affidavit for Proceeding
In Forma Pauperis**

1. I am a party in this action. I am a natural person (not a Corporation, Partnership, or other entity). In good faith, I request a court order waiving court fees and costs. I cannot support my family and myself and also pay or give security for cost.
2. I believe that I have a valid reason for pursuing this action. My pleadings (the Petition, Complaint, Answer, Appeal or other pleading) are attached.
3. I am receiving public assistance under one or more of the following means-tested programs:
 - SSI and/or MSA (Supplemental Security Income and Minnesota Supplemental Assistance Programs
 - MFIP/TANF
 - Food Stamps
 - General Assistance or Discretionary Work Program
 - MinnesotaCare, Medical Assistance or General Assistance Medical Assistance
 - Energy Assistance
 - I am receiving public assistance under some other means-tested program (Name the Program): _____

I have attached proof that I receive public assistance (such as EBT Card or cancelled check from the agency) or I will provide proof if the Judge asks for proof. If you checked the box for any of the programs listed above, go directly to the signature line on page 3.

4. I am represented by attorney _____ on behalf of _____, a civil legal services program or volunteer attorney program based on indigency. **If you checked the box for # 4, go directly to the signature line on page 3.**

5. My family size is _____. (Include yourself, your spouse or partner, your minor children and other dependents in your household.)

Name	Age	Relationship to You

6. My gross annual family income (before taxes and deductions) is \$_____, which is less than 125% of the Federal Poverty Line for my family size of _____ members. **I have attached proof of my family income or will provide proof if requested. If you checked the box for # 6, go directly to the signature line on page 3.**

If you did not check # 3, # 4, or # 6, you MUST complete the remaining questions.

7. My gross monthly income before taxes and deductions is \$_____. My net (take home) monthly income is \$_____, and the source of that income is:
 Job Unemployment Trust Income Spousal or Child Support Social Security
 Per Capita Payments Other _____.

8. My spouse's gross monthly income before taxes and deductions is \$_____. My spouse's net (take home) monthly income is \$_____, and the source of that income is _____; OR I do not know my spouse's income because _____; OR I am not married.

9. All other family members and dependents living with me who have a monthly income is as follows:

Name	Age	Net (Take Home Pay)	Source of that Income

10. I pay \$_____ per month in court-ordered child support and/or court-ordered child care.

11. I pay \$_____ per month court-ordered spousal support.

12. I pay \$_____ per month for Rent Mortgage Payment.

13. I own: Cash \$ _____
 Checking, Savings, and Credit Union Accounts \$ _____
 Cars, Other Vehicles (List Make, Year and Unpaid Loan) _____ \$ _____
 _____ \$ _____
 _____ \$ _____
 Real Estate (Market Value)
 Homestead: _____ \$ _____

Other Real Estate: _____ \$ _____

Other Personal Property (Jewelry, Stocks, Bonds, Etc.)
List Separately: _____ \$ _____
_____ \$ _____

14. I am presently \$ _____ in debt, excluding car loans and real estate mortgage/loan.

15. Other factors which support my request are (explain unusual medical expenses, emergencies, reasons that the family money is not available to you, or other circumstances to help the Judge understand your situation):

Date

Signature of Petitioner

Subscribed and Sworn before me this _____ day of _____, 20 _____.

Clerk of Courts/Notary Public