

Cause No. _____ Name: _____
Phone: (_____) _____ Mailing address is: _____
Date of Birth: _____ Email address: _____

ASSISTANCE: I or (my spouse / my children) **who live with me**, receive [Check ALL boxes that apply]:

___ Food stamps ___ Medicaid ___ TANF ___ Disability ___ SSI ___ Housing Assistance

My income sources are stated below (*check all that apply*).

___ I have been **unemployed** since: _____ (date)
___ Wages: I work as a _____ (Job Title)
for _____ (Your employer)
___ Child/spousal support ___ Unemployment
___ My spouse's income or income from another member of my household (if available)
___ Tips, bonuses ___ Military Housing ___ Workers Comp ___ Disability
___ Social Security ___ Retirement/Pension ___ Dividends, interest, royalties
___ 2nd job or other income: _____ (describe)

My income amounts are stated below.

(A) My **monthly take-home wages** \$ _____
(B) The amount I receive each month in **public benefits** \$ _____
(C) The amount of income from **other people in my household** \$ _____
(D) The amount I receive each month from **other sources** is: \$ _____
(E) My **TOTAL monthly income**: = \$ _____

Dependents: The people who live with me and depend on me financially are:

	Name	Age	Relationship to Me
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

Expenses: My monthly expenses include:

Rent/house payments	\$ _____	School & child care	\$ _____
Utilities and telephone	\$ _____	Child / spousal support	\$ _____
Medical and dental expenses	\$ _____	Insurance (life, health, auto)	\$ _____
Transportation, gasoline	\$ _____	Wages withheld by court order	\$ _____
		Total Monthly Expenses	\$ _____

___ I declare under penalty of perjury that the foregoing is true and correct.

___ I further declare under penalty of perjury that I cannot afford to hire an attorney to represent me, and I request appointment of counsel to represent me in this matter.

Signature: _____ Date: _____

For The Court's Use Only

___ Approved ___ Denied ___ Undetermined ___ Interpreter Needed

Notes: _____
