

**UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF MISSOURI**

\_\_\_\_\_) )  
**Plaintiff, Petitioner or Complainant** ) )  
vs. ) **Case No.** \_\_\_\_\_ )  
\_\_\_\_\_) )  
**Defendant(s) or Respondent(s).** ) )

**AFFIDAVIT OF FINANCIAL STATUS**

I, \_\_\_\_\_, declare that I am the \_\_\_\_\_ in the above-entitled case; that in support of my motion to proceed without being required to prepay fees, costs or give security therefore, I state that because of my poverty I am unable to pay the costs of said proceedings or to give security thereof; that I believe I am entitled to relief.

I further swear that the responses which I have made to the questions below and the information I have given relating to my ability to pay the costs of commencing and prosecuting this action are true.

**I. MARITAL STATUS AND PERSONAL DATA**

- A. Single:\_\_\_ Married:\_\_\_ Separated:\_\_\_ Divorced:\_\_\_
- B. Name of Spouse\_\_\_\_\_
- C. Age of plaintiff, petitioner or complainant:\_\_\_\_\_
- D. Age of spouse:\_\_\_\_\_
- E. Address of plaintiff, petitioner or complainant:\_\_\_\_\_  
\_\_\_\_\_
- Telephone:\_\_\_\_\_
- F. Address of spouse: \_\_\_\_\_
- Telephone:\_\_\_\_\_
- G. State name or names of dependents who live with you, their age, address,

relationship, and how much of their monthly support you provide:

---

---

---

**II. EMPLOYMENT**

A. Present employment: \_\_\_\_\_

Name of employer: \_\_\_\_\_

Address of employer: \_\_\_\_\_

Employer's telephone: \_\_\_\_\_ Length of employment: \_\_\_\_\_

Job title or description: \_\_\_\_\_

Net Income: Monthly \$ \_\_\_\_\_ Weekly \$ \_\_\_\_\_

Gross Income: Monthly \$ \_\_\_\_\_ Weekly \$ \_\_\_\_\_

Does employer provide health insurance: Yes \_\_\_\_\_ No \_\_\_\_\_

If employer provides health insurance, describe coverage: \_\_\_\_\_

---

---

B. Previous employment (Answer only if presently unemployed).

Name of employer: \_\_\_\_\_

Address of employer: \_\_\_\_\_

Employer's telephone: \_\_\_\_\_ Length of employment: \_\_\_\_\_

Job title or description: \_\_\_\_\_

Net Income: Monthly \$ \_\_\_\_\_ Weekly \$ \_\_\_\_\_

Gross Income: Monthly \$ \_\_\_\_\_ Weekly \$ \_\_\_\_\_

C. Employment of spouse:

Name of employer: \_\_\_\_\_

Address of employer: \_\_\_\_\_

Employer's telephone: \_\_\_\_\_ Length of employment: \_\_\_\_\_

Job title or description: \_\_\_\_\_

Net Income: Monthly \$ \_\_\_\_\_ Weekly \$ \_\_\_\_\_

Gross Income: Monthly \$ \_\_\_\_\_ Weekly \$ \_\_\_\_\_

**III. FINANCIAL STATUS**

(Answer questions on behalf of both the plaintiff, petitioner or complainant and spouse).

A. Owner of real property? Yes\_\_\_ No\_\_\_

If yes - Description: \_\_\_\_\_

Address: \_\_\_\_\_

In whose name? \_\_\_\_\_

Estimated value: \_\_\_\_\_

Total amount owed: \_\_\_\_\_

Owed to: \_\_\_\_\_

Annual income from property: \_\_\_\_\_

B. Owner of automobile: Yes\_\_\_ No\_\_\_

If yes - Number of automobiles owned: \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_

In whose name registered? \_\_\_\_\_

Present value: \_\_\_\_\_

Amount owed on the automobile(s): \_\_\_\_\_

Owed to: \_\_\_\_\_

Monthly payment(s): \_\_\_\_\_

C. Cash on hand: (Include checking and savings accounts)

\$ \_\_\_\_\_

List names and addresses of banks and associations:

State account numbers: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

D. Have you received within the past 12 months any money from any of the following sources:

	Yes	No
Rent payments, interest or dividends:	_____	_____
Pensions, trust funds, annuities or life insurance payments?	_____	_____
Gifts or inheritances?	_____	_____
Welfare payments?	_____	_____
ADC or other governmental child support?	_____	_____
Unemployment benefits?	_____	_____
Social Security benefits?	_____	_____
Other sources?	_____	_____

E. If the answer to any item in D above was "Yes", describe each source of money and state the amount received from each during the past 12 months:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IV. OBLIGATIONS**

A. Monthly rental on house or apartment: \_\_\_\_\_

B. Monthly mortgage payments on house: \_\_\_\_\_

Amount of equity in house: \_\_\_\_\_

C. Monthly mortgage payments on other properties: \$ \_\_\_\_\_

Amount of equity in other properties: \$ \_\_\_\_\_

D. Household expenses:

Monthly grocery expense: \_\_\_\_\_

Monthly utilities:

Gas: \_\_\_\_\_

Electric: \_\_\_\_\_

Water: \_\_\_\_\_

Other: (Specify) \_\_\_\_\_

E. Other debts and miscellaneous monthly expenses:

TO WHOM OWED AND FOR WHAT REASON INCURRED?	MONTHLY PAYMENTS	BALANCE DUE

**V. OTHER INFORMATION PERTINENT TO FINANCIAL STATUS**

(Include information regarding stocks, bonds, savings bonds, either individually or jointly owned).

\_\_\_\_\_

\_\_\_\_\_

---

---

I understand that a false statement or answer to any question in this affidavit in support of my motion to proceed in this matter in forma pauperis will subject me to penalties of perjury.

\_\_\_\_\_  
Signature of Plaintiff, Petitioner or Complainant

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

---

:affin.int