

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA
 AT _____

)	
)	
Plaintiff,)	
vs.)	CASE NO. _____
)	
Defendant.)	
)	

**REQUEST FOR EXEMPTION FROM
 PAYMENT OF FEES, AND ORDER**

I, _____, request exemption from payment of the following fees due to my financial inability to pay (select only one):

- Admin. Rule 9(f)(1) filing, certifying, and court copying fees; or
- Admin. Rule 12(e)(2) Servicemembers Civil Relief Act attorneys fees.

FINANCIAL STATEMENT

- Within the last year, the court exempted me from paying fees in this case due to my inability to pay. The fee exemption was granted on or about the following date: _____. My financial circumstances have not improved. **If you checked this box, skip sections 1 through 5 on this form.**
- I have not been exempted from paying fees in this case or my financial circumstances have improved. **If you checked this box, fill out all sections on this form.**

Phone: _____ Date of Birth: _____

Residence Address: _____

Mailing Address: _____

E-mail Address: _____

Present Employer: _____
 (If not now employed, state last employer and date employment ended.)

Employer's Address: _____

Employer's Phone: _____

1. INCOME INFORMATION (after taxes, but before other deductions):

	<u>You</u>	<u>Your Spouse</u>
a. Income during last 12 months:		
Wages	_____	_____
Public Assistance.....	_____	_____
Unemployment.....	_____	_____
Other _____	_____	_____
(Specify)		
TOTAL:	_____	_____
b. Current monthly income from all sources:	_____	_____

2. FAMILY MONTHLY EXPENSES:

Food _____
 Rent _____
 Utilities _____
 Car payments _____
 Furniture & Equipment payments _____
 Child support or alimony _____
 Loans/Time payments _____
 TOTAL EXPENSES: _____

3. FAMILY ASSETS (present value):

Cash on hand or _____
 in bank _____
 Land, bldgs, trailers _____
 Cars _____
 Snow machines, boats _____
 airplanes or other _____
 motor vehicles _____
 (except cars) _____
 Securities: stocks, _____
 bonds, notes _____
 Businesses _____
 Other Assets: _____

 TOTAL ASSETS: _____

4. FAMILY DEBTS:

Mortgage _____
 Loans _____
 Credit cards _____
 Other (bills, etc.): _____

 TOTAL DEBT: _____

5. DEPENDENTS:

<u>Name</u>	<u>Age</u>	<u>Relationship</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I swear or affirm that this financial statement is true. I understand that if I give false information in the financial statement, I may be prosecuted for perjury.

_____ Date

_____ Signature of Plaintiff/Defendant

Subscribed and sworn to or affirmed before me at _____, Alaska on _____ (date).

(SEAL)

Notary Public/Judge/Court Clerk
My Commission Expires: _____

ORDER

IT IS ORDERED that the request for exemption from payment of the following fees is:

- GRANTED. Plaintiff/defendant is exempted from paying the following fees (select one):
 - Admin. Rule 9(f)(1) filing, certifying and court copying fees; or
 - Admin. Rule 12(e)(2) Servicemembers Civil Relief Act attorneys fees.
- DENIED. Any fees now due in this case must be paid before any further action is taken. If payment is not made within 30 days after notice of the order, the court will dismiss the action without further notice. You may file the action again later if you pay the filing fee or receive a fee waiver. Admin. Rule 10(d).

Date

Judicial Officer

I certify that on _____
a copy of this order was sent to:

Type or Print Name

Clerk: _____