

IN THE _____
_____ COUNTY, OHIO _____ DIVISION

Case No. _____

Plaintiff _____

Defendant _____

Name: _____ Address: _____

Warning: This document is an official Court Document. You are making this affidavit under oath. FALSE STATEMENTS are potentially perjury, and may subject you to criminal penalties.

OTHER PERSONS LIVING IN HOUSEHOLD

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

MONTHLY INCOME/EMPLOYMENT INFORMATION

GROSS INCOME (before taxes)	SELF	SPOUSE	HOUSEHOLD MEMBERS	TOTAL
Employment				\$
Unemployment				\$
Workers' Comp				\$
Pension				\$
Social Security				\$
Child Support				\$
ADC				\$
Disability				\$
Food Stamps				\$
Other				\$
TOTAL	\$	\$	\$	\$

AFFIDAVIT OF INDIGENCY

STATE OF OHIO

COUNTY OF _____, ss:

_____, being first sworn, deposes and says that (s)he is a party in the above entitled cause; that said cause is brought in the _____ Court of _____ County, Ohio and that (s)he is:

employed unemployed a recipient of ADC/SSI/SSD and is without sufficient financial means to prepay or give security for the costs of said action. Affiant further says that (s)he has no money with which to pay the costs of said action; that (s)he has no available real property or personal property with which to secure the payment of said costs that may accrue; nor is (s)he able to give bond or any other security to cover said costs as provided by law.

I understand that the security for costs is only being deferred, and I may be required to pay the costs associated with this action at a later date.

I hereby certify that the information provided herein is true to the best of my knowledge.

Affiant

Sworn to before me and subscribed in my presence this _____ day of _____, 20_____.

Notary Public

Judge