IN THE COMMON PLEAS COURT OF HANCOCK COUNTY, OHIO

		Case No
Name		
	Plaintiff	Judge
VS.		Magistrate
Name	Defendant	AFFIDAVIT OF INDIGENCY REGARDING COST DEPOSIT IN CIVIL ACTION (To be signed in the presence of
State of Ohio Hancock County)	of a Notary Public)
)	
Transcock County	,	
I,		(your name), being duly sworn, state the
following in suppor	t of my request to be	allowed to file papers with the court without prepaying
the court costs:		
1. I am a party i	n the action listed abo	ove.
2. I have a comp	plaint, counterclaim,	petition, or motion to be filed in this case, for which I
have a good faith ba	asis.	
3. I am without	the funds or assets to	give security or a cash deposit to secure court costs at
this time.		
4. My monthly h	nousehold income co	mes from (for example, wages, TANF, Social Security,
SSI):		
and is in the amoun	t of \$	

5. My monthly expenses are:	
Type of expense	Amount of Expense
6. My assets are listed below (if none of the	type listed, mark "none" on the associated line
Checking/savings account (bank name(s) and bank name(s) and bank name(s) and bank name(s) are bank name(s).	alance(s)):
Life insurance (company and cash value):	
Stocks or bonds (nature and value):	
Cash on hand (amount):	
Investment accounts, IRAs, 401(k) plans (where	e held and balance(s)):
Real estate (location, value, and mortgage balan	nce(s)):
Vehicles, boats, campers (identify by year and r	make, value, and amounts owed):
7. The other persons in the household for wh	hom I am financially responsible are:
Name and Relationship	Date of Birth

8. Describe any special circumstances	that affect your ability to provide funds for the cost
deposit:	
9. I understand that I must inform the	Court if my financial situation change before my case
is finished.	
10. I understand that the Judge or Mag	gistrate will review my affidavit and decide if I am
required to deposit some or all of the sche	duled deposit before proceeding with my complaint,
counterclaim, petition, or motion, and that	t my case may be dismissed if I fail to pay any deposit
ordered by the court. I also understand th	at if this affidavit is incomplete, a cost deposit may be
required and/or my case may be dismissed	1.
11. I understand that it is a criminal of	fense to knowingly give false information in an
affidavit.	
12. I understand that the Court will ult	timately decide which party has to pay the court costs,
unless the court costs are waived.	
	Signature of Party Asking to File
SWORN TO AND SUBSCRIBED in 1	my presence on the day of
20	
	Notary Public
	My Commission Expires: