

INSTRUCTIONS FOR FILLING OUT FORM

PURPOSE. This form is to be used when you are filing for an action in court and you are unable to afford to pay either the filing or service fee.

FORMS INVOLVED. The form first form is a **Motion for Waiver of Filing and Service Fees**. The second form is an **Affidavit of Financial Condition**. You will need to fill in the necessary information with help from the instructions below and then file the forms with the appropriate court. Remember you do not need to mail a copy to the opposing party or fill out the certificate of service showing that you did mail a copy of the motion to the opposing party.

BURDEN OF PROOF. You as the moving party have the burden of showing the following to the court:

1. If you cannot afford to pay for filing your action and for having the papers served on the opposing party(s) you can file a **Motion for Waiver and Affidavit of Financial Condition** with the court. You do not have to serve this motion on the opposing party as it is an ex parte motion. The court will either grant or reject your motion. The court may grant your waiver if you are unemployed, are supporting several children and/or your only income is some kind of government assistance. On some occasions the court may allow you to make partial payments for the filing and service fees.

INSTRUCTIONS FOR FILLING OUT THE FORM. To fill out this form follow these instructions. The numbers to each instruction below is the number on the blank line on the form where the information for that number needs to be inserted on the form. You can print this page in its entirety or you can scroll down to the Motion form and if you scroll down farther you will find the affidavit. There will be a blank screen between these instructions and the forms and between the forms so keep scrolling or just copy this page in its entirety.

Instructions for filling out the motion:

- (1) on this line insert the name of the plaintiff.
- (2) on this line insert the name of the defendant.
- (3) insert your name
- (4) on this line explain how much you could pay now and how you could make payments on the fees.
- (5) on this line insert the day.
- (6) on this line insert the month.
- (7) on this line insert the year.
- (8) on this line insert your name by signing.

ROSEBUD SIOUX TRIBAL COURT)
ROSEBUD INDIAN RESERVATION)SS
ROSEBUD, SOUTH DAKOTA)

IN CIVIL COURT

(1) _____

DOCKET _____

PLAINTIFF(S)/PETIONER(S)

MOTION FOR WAIVER OF FILING
AND SERVICE OF PROCESS FEES

VS

(2) _____

DEFENDANT(S)/RESPONDENT(S)

Comes now (3) _____, the Plaintiff/Petitioner in this action moves this Court to waive the filing fee and process of service fee herein as follows:

1. That I am unable to financially pay such fees in this matter.
2. Attached to this motion is my financial affidavit in support of my motion for waiver of the fees and hereby incorporated to this motion by reference.
3. If a waiver of fees is not granted I may be able to pay partial fees with installment payments or make installment payments as follows: (4) _____

_____.

Wherefore, the undersigned prays this court to issue an order:

- A. Waiving the filing fee and service fee in this matter.
- B. In the alternative for partial payment or installment payments for filing and service of process fees.

Dated this (5) _____ day of (6) _____, (7) _____.

(8) _____
Plaintiff/Petitioner

INSTRUCTIONS FOR FILLING OUT THE FORM. To fill out the attached form follow these instructions. The numbers to each instruction below is the number on the blank line on the form where the information for that number needs to be inserted on the form.

Instructions for filling out the affidavit:

- (1) on this line insert the name of the plaintiff/petitioner
- (2) on this line insert the name of the defendant/respondent
- (3) on this line insert your name
- (4) on this line sign the affidavit

Note: You must sign the application and affidavit in the presence of a notary public. Most Clerks of the Court are notaries.

ROSEBUD SIOUX TRIBAL COURT)
ROSEBUD INDIAN RESERVATION)SS
ROSEBUD, SOUTH DAKOTA)

IN CIVIL COURT

(1) _____

DOCKET _____

PLAINTIFF(S)/PETIONER(S)

AFFIDAVIT OF FINANCIAL
CONDITION

VS

(2) _____

DEFENDANT(S)/RESPONDENT(S)

Comes now, (3) _____ first being duly sworn, depose and swear in support of my motion for waiver of filing and service of process of fees, I state that I am unable to pay the fees and costs and that I believe I am indigent and unable to pay the fees and costs.

I further swear and aver that my answers and responses to the questions and instructions below related to my ability to pay are true and correct.

1. Are you presently employed: _____ Yes _____ No

A. If yes, state the name, address and phone number of your employer: _____

State your gross employment income per month: \$ _____

B. If no, give date last date of employment: _____

2. Are you the head of your household: _____ Yes _____ No

A. If yes, number of persons who are dependent on you for support: _____

B. If no, name of person who is head of household: _____

3. In the last 6 months have you received any income from:

Employment Income: _____ Yes _____ No Total Amount \$ _____

Lease Payments: _____ Yes _____ No Total Amount \$ _____

Rental Payments: _____ Yes _____ No Total Amount \$ _____
 Dividend Interests: _____ Yes _____ No Total Amount \$ _____
 Worker's Compensation Benefits: _____ Yes _____ No Total Amount \$ _____
 Social Security Disability Benefits: _____ Yes _____ No Total Amount \$ _____
 Supplemental Security Income (SSI): _____ Yes _____ No Total Amount \$ _____
 Veteran's Benefits: _____ Yes _____ No Total Amount \$ _____
 Unemployment Benefits: _____ Yes _____ No Total Amount \$ _____
 Retirement Benefits: _____ Yes _____ No Total Amount \$ _____
 Public and General Welfare Benefits: _____ Yes _____ No Total Amount \$ _____
 Sale of any Real or Personal Property: _____ Yes _____ No Total Amount \$ _____
 Any other sources of income: _____ Yes _____ No Total Amount \$ _____

Total income from the last year (add all total from above: Total Amount \$ _____

4. Do you have any of the following:

Checking Account: _____ Yes _____ No Current Balance \$ _____
 Savings Account: _____ Yes _____ No Current Balance \$ _____
 Cash on Hand: _____ Yes _____ No Total Amount \$ _____

Name of Bank(s) or Institutions where account is: _____

5. Do you own any of the following:

Real Estate: _____ Yes _____ No Approximate Value \$ _____
 Stocks: _____ Yes _____ No Approximate Value \$ _____
 Bonds: _____ Yes _____ No Approximate Value \$ _____
 Notes: _____ Yes _____ No Approximate Value \$ _____
 Automobiles: _____ Yes _____ No Approximate Value \$ _____
 Other property (excluding ordinary Household furnishings and clothes) _____ Yes _____ No Approximate Value \$ _____

I understand that any false statement or answer to any questions in this affidavit subject me to the penalties of perjury. I hereby give my consent to the Tribal Court of the Rosebud Sioux Tribe to have my income verified by my employer or other sources and to inquire with my bank, if any to verify my account. I further understand that I am required to notify the Tribal Court of the Rosebud Sioux Tribe of any financial changes affecting me that may occur during the pendency of this case.

(4) _____

Subscribed and sworn before me on this _____ day of _____, _____.

SEAL

 Notary Public

My Commission Expires: _____