

MAINE JUDICIAL BRANCH

Plaintiff

"X" the court for filing:

☐ Superior Court ☐ District Court

☐ Unified Criminal Docket

V.

County: _____

Location (Town): _____

Docket No.: _____

Defendant

FINANCIAL AFFIDAVIT

Name of person whose financial information appears on this affidavit: _____

I submit this affidavit in support of ("X" one):

☐ My application to proceed without payment of fees

☐ Other: _____

Mailing Address: _____

Date of Birth (mm/dd/yyyy): _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____

INCOME:

☐ Employment. Employer is (name and address): _____

☐ Salary and wages (gross pay) \$ _____ every ☐ week ☐ biweekly ☐ month

☐ other: _____

OR

☐ Hourly wage \$ _____ and number of hours worked _____ per ☐ week ☐ biweekly ☐ month

☐ other: _____

☐ Benefits (check all that apply):

☐ Unemployment ☐ Social Security ☐ TANF ☐ Alimony/child support

☐ Other: _____

Total \$ _____ per ☐ week ☐ biweekly ☐ month ☐ other: _____

(if you get multiple benefits, list the total amount of all the benefits per month above)

ASSETS:

☐ Cash bail I posted (1st party) in this or any other case (total amount) \$ _____

☐ Cash on hand \$ _____ ☐ Cash in the Bank \$ _____ ☐ Money owed to me \$ _____

Property worth more than \$250 (include property owned alone or with any other person):

☐ House \$ _____ (amount owed on house: \$ _____)

☐ Vehicle \$ _____ ☐ Stocks \$ _____

☐ Recreational Vehicles (boat, ATV, snowmobile, etc.) \$ _____

☐ Other: _____ \$ _____

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk.

Language Services: For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

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EXPENSES (Monthly):

<input type="checkbox"/> Mortgage: \$ _____	<input type="checkbox"/> Child Support: \$ _____	<input type="checkbox"/> Utilities: \$ _____
<input type="checkbox"/> Food: \$ _____	<input type="checkbox"/> Cable: \$ _____	<input type="checkbox"/> Credit Card: \$ _____
<input type="checkbox"/> Loans: \$ _____	<input type="checkbox"/> Heat: \$ _____	<input type="checkbox"/> Rent: \$ _____
<input type="checkbox"/> Cell Phone: \$ _____	<input type="checkbox"/> Other: _____	\$ _____

Check any of the following that apply:

☐ I have _____ (*number*) of children who live with me

☐ I have _____ (*number*) of children for whom I pay support of \$ _____ per
☐ week ☐ bi-weekly ☐ month ☐ other _____

☐ I live alone

☐ I live with another who is my ☐ spouse ☐ friend ☐ parent(s) ☐ other _____

☐ The person I live with shares my living expenses and contributes \$ _____ per
☐ week ☐ bi-weekly ☐ month ☐ other _____

☐ I have read the above form, I understand it, and the answers to the questions are true. I understand and agree that further investigation may be conducted, if necessary, to verify the information that I have provided. I also understand that I have a continuing obligation, personally and through counsel, to report to the court any changes in my employment or other financial circumstances.

☐ I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000.00 if I give false information to the court.

Date (mm/dd/yyyy): _____



Signature of Applicant

Subscribed and sworn to before me,

Date (mm/dd/yyyy): _____

☐ Notary ☐ Clerk ☐ Attorney ☐ Judge ☐ Justice

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