

IN THE CIRCUIT/COUNTY COURT OF THE 12 JUDICIAL CIRCUIT
IN AND FOR Sarasota COUNTY, FLORIDA

JADRANKA SWEETING
Plaintiff/Petitioner or In the Interest of

Bunak Ali Arax vs.

Defendant/Respondent

CASE NO. 2025 DR 5918 NC

APPLICATION FOR DETERMINATION OF CIVIL INDIGENT STATUS

Notice to Applicant: If you qualify for civil indigence, the filing and summons fees are waived; other costs and fees are not waived.

1. I have dependents. (Include only those persons you list on your U.S. Income tax return.)

Are you Married?...Yes....No Does your Spouse Work?... Yes....No Annual Spouse Income? \$ 45.000

2. I have a net income of \$ 22.000 paid () weekly () every two weeks () semi-monthly () monthly () yearly () other. (Net income is your total income including salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, minus deductions required by law and other court-ordered payments such as child support.)

3. I have other income paid () weekly () every two weeks () semi-monthly () monthly () yearly () other. (Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No")

Second Job	Yes \$ <input checked="" type="checkbox"/>	Veterans' benefits	Yes \$ <input checked="" type="checkbox"/>
Social Security benefits		Workers compensation	Yes \$ <input checked="" type="checkbox"/>
For you.....	Yes \$ <input checked="" type="checkbox"/>	Income from absent family members	Yes \$ <input checked="" type="checkbox"/>
For child(ren).....	Yes \$ <input checked="" type="checkbox"/>	Stocks/bonds	Yes \$ <input checked="" type="checkbox"/>
Unemployment compensation.....	Yes \$ <input checked="" type="checkbox"/>	Rental income	Yes \$ <input checked="" type="checkbox"/>
Union payments	Yes \$ <input checked="" type="checkbox"/>	Dividends or interest.....	Yes \$ <input checked="" type="checkbox"/>
Retirement/pensions	Yes \$ <input checked="" type="checkbox"/>	Other kinds of income not on the list	Yes \$ <input checked="" type="checkbox"/>
Trusts	Yes \$ <input checked="" type="checkbox"/>	Gifts	Yes \$ <input checked="" type="checkbox"/>

I understand that I will be required to make payments for costs to the clerk in accordance with §57.082(5), Florida Statutes, as provided by law, although I may agree to pay more if I choose to do so.

4. I have other assets: (Circle "yes" and fill in the value of the property, otherwise circle "No")

Cash	Yes \$ <input checked="" type="checkbox"/>	Savings account.....	Yes \$ <input checked="" type="checkbox"/>
Bank account(s)	Yes \$ <input checked="" type="checkbox"/>	Stocks/bonds	Yes \$ <input checked="" type="checkbox"/>
Certificates of deposit or		Homestead Real Property*	Yes \$ <input checked="" type="checkbox"/>
Money market accounts	Yes \$ <input checked="" type="checkbox"/>	Motor Vehicle*	Yes \$ <input checked="" type="checkbox"/>
Boats*	Yes \$ <input checked="" type="checkbox"/>	Non-homestead real property/real estate*	Yes \$ <input checked="" type="checkbox"/>
		Other assets*	Yes \$ <input checked="" type="checkbox"/>

Check one: I () DO () NOT expect to receive more assets in the near future. The asset is _____.

5. I have total liabilities and debts of \$ _____ as follows: Motor Vehicle \$ _____, Home \$ _____, Boat \$ _____, Non-homestead Real Property \$ _____, Child Support paid direct \$ _____, Credit Cards \$ 300, Medical Bills \$ _____, Cost of medicines (monthly) \$ _____, Other \$ _____.

6. I have a private lawyer in this case..... Yes No

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under s. 57.082, F.S. commits a misdemeanor of the first degree, punishable as provided in s.775.082, F.S. or s. 775.083, F.S. I attest that the information I have provided on this application is true and accurate to the best of my knowledge.

Signed on 11/12, 2025
1969 2480

Year of Birth Last 4 digits of Driver License or ID Number

Email address: VESELIC69@GMAIL.COM Phone Number/s: 941/679-5448
3350 SOUTH 8TH PROV AVE #111a, SARASOTA, FL 34236

Address: Street, City, State, Zip Code

This form was completed with the assistance of: _____

Clerk/Deputy Clerk/Other authorized person.

CLERK'S DETERMINATION:

Based on the information in this Application, I have determined the applicant to be Indigent Not Indigent according to s. 57.082, F.S.
Dated on November 12, 2025.

KAREN E. RUSHING, CLERK

Clerk of the Circuit Court

By K.E. Rushing, Deputy Clerk

APPLICANTS FOUND NOT TO BE INDIGENT MAY SEEK REVIEW BY A JUDGE BY ASKING FOR A HEARING TIME. THERE IS NO FEE FOR THIS REVIEW.
Sign here if you want the judge to review the clerk's decision _____

