

JAD RANKA SWEETING  
Plaintiff/Petitioner or In the Interest of  
Burak Ali Arar 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 0 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? \$ 31,200

2. I have a net income of \$ 3,400 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 \$ | <u>No</u> | Veterans' benefits .....                    | Yes \$ | <u>No</u> |
| Social Security benefits        |        |           | Workers compensation .....                  | Yes \$ | <u>No</u> |
| For you .....                   | Yes \$ | <u>No</u> | Income from absent family members .....     | Yes \$ | <u>No</u> |
| For child(ren) .....            | Yes \$ | <u>No</u> | Stocks/bonds .....                          | Yes \$ | <u>No</u> |
| Unemployment compensation ..... | Yes \$ | <u>No</u> | Rental income .....                         | Yes \$ | <u>No</u> |
| Union payments .....            | Yes \$ | <u>No</u> | Dividends or interest .....                 | Yes \$ | <u>No</u> |
| Retirement/pensions .....       | Yes \$ | <u>No</u> | Other kinds of income not on the list ..... | Yes \$ | <u>No</u> |
| Trusts .....                    | Yes \$ | <u>No</u> | Gifts .....                                 | Yes \$ | <u>No</u> |

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 \$ | <u>No</u> | Savings account .....                          | Yes \$ | <u>No</u> |
| Bank account(s) <u>1009\$</u> ..... | Yes \$ | <u>No</u> | Stocks/bonds .....                             | Yes \$ | <u>No</u> |
| Certificates of deposit or          |        |           | Homestead Real Property* .....                 | Yes \$ | <u>No</u> |
| Money market accounts .....         | Yes \$ | <u>No</u> | Motor Vehicle* .....                           | Yes \$ | <u>No</u> |
| Boats* .....                        | Yes \$ | <u>No</u> | Non-homestead real property/real estate* ..... | Yes \$ | <u>No</u> |
|                                     |        |           | Other assets* .....                            | Yes \$ | <u>No</u> |

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

5. I have total liabilities and debts of \$ 12,200 as follows: Motor Vehicle \$ 10,000, Home \$ \_\_\_\_\_, Boat \$ \_\_\_\_\_, Non-homestead Real Property \$ \_\_\_\_\_, Child Support paid direct \$ \_\_\_\_\_, Credit Cards \$ 1,200, Medical Bills \$ 6,500, Cost of medicines (monthly) \$ 50, 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.

03/12/2001 - 900-0

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

Email address: burakaliarar360outlook.com

3360 S Osprey Ave #1111A Sarasota FL 34239

Address: Street, City, State, Zip Code

Signature of Applicant for Indigent Status

Print Full Legal Name Burak Ali Arar

Phone Number/s: 941-266-16-10

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. 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.