12. SAMPLE FORMS

FORM 1: AFFIDAVIT OF INDIGENCY (PAUPER'S AFFIDAVIT)

IN THE COURT OF APPEALS OF GEORGIA

,)			
Appellant[s])			
VS.)	Case No.		
)	Cusc 110.		
,)			
Appellee[s])			
AF	FIDAVIT OF INDIG	ENCY		
Comes nowstates that I am financially unable to of Georgia, and I request that I be pwithout having to pay filing fees. I questions and instructions below are	o pay the filing fee rec permitted to file Appe further swear that the	quired for fi llant's Brie	ling in the Court f or Appellant's	t of Appeals Application
1. Are you presently employed either if the answer is "Yes", state the amaddress and telephone number of you	ount of your salary o			e the name,
If the answer is "No", state the date of month which you received:	of last employment and	d the amoun	t of the salary an	d wages per
2. Have you received within the past	twelve months any m	oney from a	ny of the follow	ing sources?
	C 1C 1 49	3 7	N T	
Business, profession or form Pensions, annuities or life ins	± •	— Yes Yes	$-rac{ m No}{ m No}$	
Rent payments, interest or di		-Yes	No No	
Gifts or inheritances?		Yes	- No	
State or Federal benefit allow	vances?	Yes	No	
Any other sources?		Yes	No	

If the answer to any of the above questions is "Yes", describe each source of money and state the amount received from each source during the past twelve months:						
3. Do you own any cash, or do you have money in a checking or savings account? Yes No If the answer is "Yes", state the total value of the items owned:						
4. Do you own any real estate, stocks, bonds, notes, automobiles or other property (excluding ordinary household furnishings and clothing)?YesNo If the answer is "Yes", describe the property and state its approximate value:						
5. List the persons who are dependent on you for financial support, state your relationship to those persons, and indicate how you contribute toward their support:						
6. Are you being represented by counsel? If the answer is "Yes", was counsel appointed by the State? Yes No If counsel was not appointed by the State, is/was counsel paid by you? Yes No If counsel is/was paid by you, please explain your ability to pay counsel but not court fees:						
7. Did you apply for pauper status in the trial court? Yes No If the answer is "Yes", did the lower court grant your request? Yes No If you were not considered indigent in the lower court, explain why such status should be granted in this Court:						
If the answer is "Yes", describe the property and state its approximate value: 5. List the persons who are dependent on you for financial support, state your relationship to those persons, and indicate how you contribute toward their support: 6. Are you being represented by counsel? 7. Did you apply for pauper status in the trial court? 7. Did you apply for pauper status in the trial court? 7. Did you apply for pauper status in the trial court? 7. Did you apply for pauper status in the trial court? 7. Did you apply for pauper status in the trial court? 7. Did you apply for pauper status in the lower court grant your request? 7. Did you were not considered indigent in the lower court, explain why such status should be granted						

I understand that a false statement or answer to any question in this affidavit will subject me to penalties for perjury and that state law provides as follows:

- (a) A person to whom a lawful oath or affirmation has been administered commits the offense of perjury when, in a judicial proceeding, he knowingly and willfully makes a false statement material to the issue on point in question.
- (b) A person convicted of the offense of perjury shall be punished by a fine of not more than \$1000

or by imprisonment OCGA § 16-10-70		ne nor more than ten ye	ears, or both.	
		_(your name), do swear it are true. I further atto or needlessly increase		under penalty of law that affidavit is not submitted litigation.
This the	(Day) of	(Month),	(Year).	
	(You	(Your name printed or typed)		
(Sign your name)				
(You	r complete address,	telephone number, and	e-mail addr	ess, if any)
Sworn to and subse	cribed before me			SEAL
This the (Da	ay) of	(Month), (Y	ear).	
	Notar	y Public		