

State of Ohio : _____ Court
 : SS
County of _____ : Case No. _____

POVERTY AFFIDAVIT

I, _____ (print name), being first duly sworn, depose and say that I am the _____ (plaintiff or defendant) in this case and do not have sufficient funds to pay the fines and costs imposed in my case. I submit the following information in support of my allegation of poverty.

GROSS MONTHLY INCOME:

From Employment:

Amount: _____ Place of Employment: _____

From Other Sources:

Amount: _____ Source: _____

Number of Dependents: _____

ASSETS:

Cash on Hand or on Deposit: _____

Real Estate: Address: _____

Market Value: _____

Mortgage Owed: _____

Automobile: Year & Make: _____

Market Value: _____

Balance Owed: _____

Other: Description: _____

Approximate Market Value: _____

I hereby represent that the information set forth above concerning my financial condition is true and complete to the best of my knowledge and belief.

Signature

SWORN TO, BEFORE ME, and subscribed in my presence this _____ day of _____, 20____.

Notary Public