

NTSIG TXOG/CONFIDENTIAL

Xeev Minnesota/ State of Minnesota

Tsev Hais Plaub
Nqi Se/ Tax
Court

Ib Cheeb Tsam Nroog/County

Ntsig Txog Tsev Hais
Plaub Hauv Ib Cheeb
Tsam Nroog:/ Judicial
District:
Tus Nab Npawb Foob
Hauv Tsev Hais Plaub:/
Court File Number:
Hom Teeb Meem:/ Case
Type:

Tus Neeg Thov Mus Rau Qib Siab Kom Txiax
Txim Dua/Tus Neeg Thov Kom Muaj Cai Saib
Xyuas Dua/ Appellant/Petitioner

Kev Muab Lus Ua Tim Khaww
rau Kev Sib Foob Rau Hn Forma
Pauperis/ Affidavit for Proceeding
In Forma Pauperis

piv rau/ vs

(Txoj Cai Lij Choj Ntawm
Minnesota § 563.01)/ (Minn. Stat. §
563.01)

Tus Neeg Foob/Tus Neeg Raug Foob/
Appellee/Respondent

1. Kuv yog ib tog hauv qhov kev txiax txim no. Kuv yog ib tug neeg nruab nrab (tsis muaj ib lub tuam txhab, ib lub chaw sib koom tes, los sis lwm lub chaw). Hauv kev ncaj ncees, kuv thov ib lub tsev hais plaub zam cov nqi them thiab tej nqi sib hais plaub. Kuv tsis tsis txawm peev yuav noj yuav haus rau kuv tsev thiab kuv tus kheej lawm thiab kuj them tsis taus los sis muaj peev xwm them taus tej nqi ntawd.

I am a party in this action. I am a natural person (not a corporation, partnership, or other entity). In good faith, I request a court order waiving court fees and costs. I cannot support my family and myself and also pay or give security for costs.

2. Kuv ntseeg tias kuv muaj laj thawj tsim nyog rau qhov tshuaj xyuas rau qhov txiax txim no. Kuv cov lus daws (Kev Thov Kom Feem Muaj Cai Saib Xyuas Dua, Ceeb Toom txog Kev Thov Kom Rov Qab Txiax Txim Dua, los sis lwm qhov kev daws) tau muab tso ua ke tuaj no lawm.

I believe that I have valid reasons for pursuing this action. My pleadings (the Petition, Notice of Appeal, or other pleading) are attached.

3. a. Kuv tab tom tau txais kev pab los ntawm tsoom fwm rau hauv ib los sis ntau qhov raug ntuas xws li nram qab no./ I am receiving public assistance under one or more of the following means-tested programs:

- Minnesota Cov Khoos Kas Pab Txhawb Ntxiv (Minnesota Supplemental Assistance Programs, MSA);/ MSA (Minnesota Supplemental Assistance Programs);
Minnesota Qhov Khoos Kas Pab Nqis Peev Rau Tsev Neeg (Minnesota Family Investment Program, MFIP);/ MFIP (Minnesota Family Investment Program);
Khoos Kav Pab Khoo Noj/Food Stamps;
Khoos Kas Pab Dav Dav los sis Khoos Kas Pab Txiax Txim Txog Hauj Lwm;/ General Assistance or Discretionary Work Program;
MinnesotaCare, Kev Pab Kuaj Mob, los sis Kev Pab Dav Dav Kev Pab Kuaj Mob;/MinnesotaCare, Medical Assistance, or General Assistance Medical Assistance;
Kev Pab Hluav Taws Xob;/ Energy Assistance;

b. Kuv tab tom tau txais kev pab los ntawm tsoom fwm rau hauv khoos kas pab uas raug ntsuas lwm yam: (Npe khoos kav pab)/ I am receiving public assistance under some other means-tested program:(Name the program)

Kuv tau muab daim ntawv ua pov thawj uas kuv txais kev pab los ntawm tsoom fwm tso nrog ua ke tuaj no lawm (xws li ib daim npav ntawm MFIP los sis ib daim tshew nyiaj uas raug thim los ntawm ib lub chaw) los sis kuv yuav tau ua pov thawj yog tau thov txog./ I have attached proof that I receive public assistance (such as MFIP card or cancelled check from agency) or I will provide proof if requested.

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c  Kuv tau txais Cov Nyiaj Pab Txhawb Ntxiv Rau Feem Kev Ruaj Ntseg (Supplemental Security Income, SSI) ua pov thawj rau kuv tej nqi siv nyiaj./I receive Supplemental Security Income (SSI) as a resource for meeting my expenses.

4.  Kuv yog sawv cev ntawm tus kws lij choj \_\_\_\_\_ sawv cev tam rau ntawm \_\_\_\_\_  
 ib qho khoos kas pab txoj cai rau pej xeeb los sis khoos kas kws lij choj yeem pab dawb,raws li qhov tsis txawm peev  
 I am represented by attorney \_\_\_\_\_ on behalf of \_\_\_\_\_  
 \_\_\_\_\_ a civil legal services  
 program or volunteer attorney program, based on indigency.

5. Kuv tsev muaj/ My family size is \_\_\_\_\_. (Suav nrog koj tus kheej, koj tus txij nkawm, koj cov me nyuam me, thiab lwm cov neeg uas nyob tos nrhiav rau noj hauv koj yim neeg.) Rau qhov ntau tsawg ntawm kuv tsev neeg, kuv tau suav kuv tus kheej thiab (tag nrho lwm cov neeg):/(Include yourself, your spouse, your minor children, and other dependents in your household.) For my family size, I counted myself and (list all others):

| Lub npe/ Name | Hnub nyooog/Age | Txheeb ze rau koj/ Relationship to you |
|---------------|-----------------|--|
|               |                 |  |
|               |                 |  |
|               |                 |  |
|               |                 |  |

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6.  Tag nrho kuv tsev neeg cov nyiaj tau los hauv **ib lub xyoo** (ua ntej them se thiab lov tawm) yog \$ \_\_\_\_\_ uas tsawg dua 125% ntawm Tsoom Fwv Theem Neeg Txom Nyem rau kuv tsev neeg uas muaj \_\_\_\_\_ leej lawm. **Kuv tau muab daim ntawv ua pov thawj txog cov nyiaj tau los ntawm kuv tsev neeg tso ua ke tuaj rau ntawm lawm los sis kuv yuav muab qhov ua pov thawj qhia raws li tau thov txog.**

My gross **annual** family income (before taxes and deductions) is \$ \_\_\_\_\_ which is less than 125% of the Federal Poverty Line for my family size of \_\_\_\_\_ members.

**I have attached proof of my family income or I will provide proof if requested.**

7. Tag nrho kuv cov nyiaj tau los hauv **lub hlis** ua ntej them se thiab lov tawm yog \$ \_\_\_\_\_. Tag nrho cov nyiaj tau kiag ntawm tes (nqa los tsev) hauv **lub hli** yog \$ \_\_\_\_\_, thiab tau cov nyiaj ntawd los ntawm/My gross **monthly** income before taxes and deductions is \$ \_\_\_\_\_. My net (take home) **monthly** income is \$ \_\_\_\_\_, and the source of that income is:

- Hauj lwm / nqi dag zog/ Job / wages
- Nyiaj Tsis Muaj Hauj Lwm Ua/ Unemployment
- Nyiaj Them Yug Rau Tus Txij Nkawm/ Spousal Support
- Nyiaj Faj Seeb Uas Tau Los/ Trust Income
- Nyiaj Xaus Xaus Pab Neeg Txom Nyem/Social Security
- Lwm yam/ Other: \_\_\_\_\_

8. Tag nrho kuv tus txij nkawm cov nyiaj tau los hauv **lub hlis** ua ntej them se thiab lov tawm yog \$ \_\_\_\_\_. Tag nrho cov nyiaj tau los kiag ntawm tes ntawm kuv tus txij nkawm (nqa los tsev)hauv **lub hlis** yog \$ \_\_\_\_\_, thiab tau cov nyiaj ntawd los ntawm \_\_\_\_\_; LOS SIS, kuv tsis paub kuv tus txij nkawm tej nyiaj tau los vim hais tias: \_\_\_\_\_

My spouse's gross **monthly** income before taxes and deductions is \$ \_\_\_\_\_  
My spouse's net (take home) **monthly** income is \$ \_\_\_\_\_, and the source of that income is \_\_\_\_\_; OR, I do not know my spouse's income because:

LOS SIS/ OR  Kuv tsis muaj txij nkawm./ I am not married.

9. Txhua lwm tus tswv cuab hauv tsev neeg thiab cov neeg nyob tos nrhiav rau noj uas nyob nrog kuv tag nrho cov nyiaj tau los ntawm tes kiag hauv **lub hlis** muaj raws li nram qab no:/ All other family members and dependents living with me have net **monthly** income as follows:

| Lub npe ntawm tus neeg<br>no/ Name of person | Hnub<br>nyoog/Age | Tag nrho cov nyiaj tau los kiag (nqa los tsev)<br>hauv lub hlis/ Net (take home) monthly income | Cov Nyiaj Ntawd Tau Los<br>Ntawm/ Source of that Income |
|--|-------------------|---|---|
|  |                   |   |   |
|  |                   |   |   |

10. Kuv tau lav nyiaj \$ \_\_\_\_\_toj hli rau cov nyiaj tu yug tus me nyuam (suav nrog cov nyiaj kuaj mob thiab/los sis cov nyiaj saib xyuas me nyuam).  
I receive \$ \_\_\_\_\_per month in child support (includes medical support and/or child care support).
11. Kuv them \$ \_\_\_\_\_toj hli rau cov nyiaj tu yug me nyuam uas raug txib tuaj tim tsev hais plaub (suav nrog nqi kuaj mob thiab/los sis nqi saib xyuas me nyuam).  
I pay \$ \_\_\_\_\_per month in court-ordered child support (includes medical support and/or child care support).
12. Kuv them \$ \_\_\_\_\_toj hli rau cov nyiaj tu yug tus txij nkawm.  
I pay \$ \_\_\_\_\_per month in court-ordered spousal support.
13. Kuv them \$ \_\_\_\_\_toj hli rau  nqi xauj tsev  them nqi yuav tsev.  
I pay \$ \_\_\_\_\_per month for 0 rent 0 mortgage payment.

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14. Kuv tshuav nuj nqi: Nyiaj ntsuab/ **I o w n : C a s h** \$ \_\_\_\_\_  
Nyiaj Tshev, nyiaj txuag cia, thiab nyiaj qiv txais/ Checking, savings, and credit union accts  
\$ \_\_\_\_\_  
Tej Tsheb, los sis lwm yam tsheb (sau hom khoom, xyoo tsim, thiab tus nqi [tus nqi raws kiab khw  
lov rau cov nyiaj qiv txais uas tsis tau them])/ Cars, other vehicles (list make, year, and equity value [market value  
minus unpaid loans])  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
Vaj Tse (tus nqi kiab khw lov rau cov nyiaj them yuav tsev/cov nyiaj qiv txais uas tsis tau them)/ Real Estate  
(market value minus unpaid mortgage/loans)  
Vaj tse nyob:/ Homestead: \$ \_\_\_\_\_  
Lwm Hom Vaj Tse:/ Other Real Estate: \$ \_\_\_\_\_  
Lwm yam khoom muaj nqis ntawm tus kheej (nyiaj kub, nyiaj nqis peev ua lag luam, nyiaj qiv txais uas lag  
luam, thiab lwm yam - nyias sau rau nyias li)/ Other personal property (jewelry, stocks, bonds, etc. - list  
separately)  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

15. Tam sim no kuv tseem tshuav \$ \_\_\_\_\_ hauv cov nuj nqi, tsis suav cov nyiaj qiv txais yuav tsheb thiab  
vaj tse nqi them yuav tsev/nyiaj qiv txais.  
I a m p r e s e n t l y \$ \_\_\_\_\_ in debt, excluding car loans and real estate  
mortgage/loans.

16. Lwm feem uas pab txhawb rau koj daim ntawv thov yog (piav qhia txog tej nqi kuaj mob uas txawv txawv, tej kis muaj  
xwm txheej ceev, cov laj thawj uas tsev neeg tsis muaj nyiaj rau koj, los sis lwm yam xwm txheej los pab Tus Kws  
Txiaiv Txim Plaub Ntug kom nkab siab txog koj qhov teeb meem): \_\_\_\_\_

Other factors which support your request are (explain unusual medical expenses, emergencies, reasons that the  
family money is not available to you, or other circumstances to help the Judge understand your situation): \_\_\_\_\_  
\_\_\_\_\_

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**Kev kos npe rau hauv Daim Ntawv Muab Lus Ua Tim Khawv no, kuv tau lees tias cov ntaub ntawv no mas yeej muab tseeb lawm raws li lub txim uas hais tsis muaj tseeb. Kuv nkag siab tias yog kuv muab tej ntaub ntawv cuav sau rau daim ntawv foos no ces yuav raug foob raws li kev ua txhaum cai. Kuv nkag siab tias yog tsis sau raws li qhov muaj nyob rau hauv daim ntawv foos no los sis tsis muab cov ntaub ntawv sau rau los sis tsis muaj cov ntaub ntawv teev tseg uas tau thov qhia ces kuv muaj peev xwm tsis kam lees qhov foob tuaj rau hauv In Forma Pauperis. Kuv tso cai rau tshuaj xyuas qhov tseeb uas muaj nyob rau hauv Daim Ntawv Muab Lus Ua Tim Khawv no raws li cov kev kuaj ntsuas uas tsim nyog.**

**By signing this Affidavit, I am certifying that these statements are true under penalty of perjury. I understand that if I provide false information on the form it may lead to criminal charges. I understand that failure to execute the form or failure to provide information or requested records may result in denial of my motion to proceed In Forma Pauperis. I am authorizing that the facts contained in this Affidavit may be verified by any means required.**

Hnub tim/ Dated: \_\_\_\_\_ Kos npe/ Signature \_\_\_\_\_

\_\_\_\_\_ Ib cheeb tsam nroog thiab lub xeev kos npe/ County and state where signed

Lub npe/ Name: \_\_\_\_\_

Chaw nyob/ Address: \_\_\_\_\_

Nroog/Xeev/Zip/ City/State/Zip: \_\_\_\_\_

Xov Tooj/ Telephone: ( ) \_\_\_\_\_

Tus E-mail/ E-mail address: \_\_\_\_\_