

State of Minnesota
Gobolka Minnesota

County Degmada

Maxkamadda Cashuurta

Judicial District: _____
Degmada Xukunka: _____
Court File Number: _____
Lambarka Faylka Maxkamadda: _____
Case Type: _____
Nooca Kiiska: _____

Appellant/Petitioner
Racfaan-qaataha/Dacwoodaha

Dhaarta Hore ugu sii socodka
In Forma Pauperis

Ka soo horjeeda

(Sharciga. Minn. § 563.01)

Appellee/Respondent
Racfaan laga qaataha/Eedayanaha

1. 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.

Waxaan qayb ka ahay ficilkan. Anigu waxaan ahay qof caadi ah (ma ihi shirkad, shuraako, ama hay'ad kale). Aniga oo niyad san, waxaan codsanayaa amar maxkamadeed oo laygaga dhaafo khidmadaha iyo kharashaadka maxkamadda. Ma masruufi karo qoyskayga iyo naftayda sidoo kale ma bixin karo ama siin karo kharashaadka amniga.

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

Waxaan rumeysanahay inaan haysto sababo macquul ah oo aan ku sii wado ficilkan. **Dacwadahayga** (Dacwadda, Ogaysiiska Racfaanka, ama qirasho kale) **ayaa halkan ku lifaaqan.**

3. a. I am receiving public assistance under one or more of the following **means-tested** programs.

Waxaan qaadanayaa gargaarka dadweynaha ee hoos yimaad mid ka mid ah ama in ka

badan barnaamijyada soo socda ee la tijaabiyay.

- MSA (Minnesota Supplemental Assistance Programs)
- MSA (Barnaamijyada Caawinta Dheeraadka ah ee Minnesota);
- MFIP (Minnesota Family Investment Program);
- MFIP (Barnaamijka Maalgelinta Qoyska ee Minnesota);
- Food Stamps;
- Boonooyinka Raashinka;
- General Assistance or Discretionary Work Program;
- Gargaarka Guur ama Barnaamijka Shaqada Ikhtiyaariga ah;
- MinnesotaCare, Medical Assistance, or General Assistance Medical Assistance;
- Daryeelka Minnesota, Gargaarka Caafimaadka, ama Gargaarka Guud Gargaarka Caafimaad;
- Energy Assistance;
- Gargaarka Tamarta;

b. I am receiving public assistance under some other means-tested program: (Name the program) _____

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.**

Waxaan qaadnayaa gargaarka dadweynaha ee hoos yimaad qaar ka mid ah barnaamij kale oo la tijaabiyay: (Magacow barnaamijka) _____

Waxaan ku soo lifaaqay caddayn ah inaan helo gargaarka dadweynaha (sida kaarka MFIP ama jeegga laga joojiyay ee wakaaladda) **ama waxaan bixin doonaa caddayn haddii la i weydiyo.**

c. I receive Supplemental Security Income (SSI) as a resource for meeting my expenses.

Waxaan helayaa Kabitaan Dakhli oo Dheeraad ah (SSI) oo ah ilo aan ku dabooli karo kharashyadayda.

4. I am represented by attorney _____ on behalf of _____ a civil legal services program or volunteer attorney program, based on indigency.

Waxaan wakiishay qareen _____ ka wakiil ah _____ ee barnaamijka adeegyada sharciga madaniga ama barnaamijka qareenka mutadawaca ah, iyadoo ku salaysan saboolnimo.

5. My family size is _____. (Include yourself, your spouse, your minor children, and other dependents in your household.) For my family size, I counted myself and (list all others):

Tirada qoyskeygu waa _____. (Ku dar naftaada, saygaaga/xaaskaaga, carruurtaada yar yar, iyo dadka kale ee ku tiirsan gurigaaga.) Tirada qoyskayga, waan ku tiriyey naftayda (qor kuwa kale oo dhan):

Name Magaca	Age Da'ada	Relationship to you Siday kuula xiriiraan

6. 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.**

Dakhliga guud ee **sanadlaha ah** ee qoyskayga (ka hor canshuurta iyo ka-jaritaanada) kaas oo kayar 125% Khadka Saboolnimada Faderaalka ee tirada qoyskayga ee ah _____xubnood. **Waxaan ku soo lifaaqay caddaynta dakhliga qoyskayga ama waxaan bixin doonaa caddeyn haddii la codsado.**

7. My gross **monthly** income before taxes and deductions is \$ _____. My net (take home) **monthly** income is \$ _____, and the source of that income is: Job/wages

Dakhligayga guud ee **bilaha ah** kahor canshuuraha iyo ka-jaritaanada waa \$ _____.
Dakhligayga saafiga ah (guriga loo qaado) ee **billaha ah** waa \$ _____, isha dakhliguna waa: Shaqo/Mushahar.

- Unemployment/Shaqo la'aan Spousal Support/Taageero Lamaane
 Trust Income/Dakhliga Trust Social Security/Soshiyal Sekuyurati
 Other/Wax kale

8. 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: _____

OR I am not married.

Dakhliga guud ee lammaanahayga ee **billaha ah** kahor canshuuraha iyo ka-jaritaanada waa \$ _____. Dakhliga Saafiga ah ee lammaanahaygu (guriga loo qaado) ee

billaha ah waa \$_____, isha dakhliguna waa _____. AMA, ma ogi dakhliga _____ lammaanahayga _____ sababtoo ah: _____

9. All other family members and dependents living with me have net **monthly** income as follows:

Dhammaan xubnaha kale ee qoyska iyo kuwa igu tiirsan ee ila nool waxay u leeyihiin dakhliga saafiga ah ee **bille ah** sida soo socota:

Name of Person	Age	Net(take home) monthly income	Source of that income
Magaca shaqsiga	Da'ada	Dakhliga (guriga loo qaado)	billaha ee saafiga ah Isha dakhliga

10. I receive \$ _____ per month in child support (includes medical support and/or child care support).

Waxaan helaa \$_____ bishiiba oo ah taageerada ilmaha (oo ay ku jirto taakulaynta caafimaadka iyo/ama taageerada daryeelka ilmaha).

11. I pay \$_____per month in court-ordered child support (includes medical support and/or child care support).

Waxaan ku bixiyaa \$_____amarka maxkamadda ee taageerada ilmaha (oo ay ku jiraan taageerada caafimaadka iyo/ama taageerada daryeelka ilmaha).

12. I pay \$ _____per month in court-ordered spousal support.

Waxaan ku bixiyaa \$_____bishiiba taageerada lammaanaha ee maxkamadu amartay.

13. I pay \$ _____per month for rent mortgage payment.

Waxaan ku bixiyaa \$_____bishii kirada bixinta deynta.

14. I own: Cash \$_____

Checking, savings, and credit union accts \$_____

Cars, other vehicles (list make, year, and equity value [market value minus unpaid loans]) _____.

Real Estate (market value minus unpaid mortgage/loans)

Homestead: \$ _____

Other Real Estate: \$ _____

Other personal property (jewelry, stocks, bonds, etc – list separately)

_____ \$ _____

_____ \$ _____

Aniga iska leh: Lacag caddaan ah \$ _____

Akoonada hubinta, keydinta iyo isutagga deynta \$ _____

Baabuur, gawaari kale (qor qiimaha sanadka, iyo sinnaanta [qiimaha suuqa oo laga jaray amaahda aan la bixin]) _____.

Hantida Maguurtada ah (qiimaha suuqa oo laga jaray deynta/amaahda aan la bixin)

Guryaha: \$ _____

Hantida kale ee Maguurtada ah: \$ _____

Hantida kale ee shaqsiyeed (jawharadaha, suuqyada, maalgelin, iwm – u qor si ka duwan)

_____ \$ _____

_____ \$ _____

15. I am presently \$ _____ in debt, excluding car loans and real estate mortgage/loans.

Waxaan hadda ku jiraa \$ _____ oo deyn ah, marka laga reebo amaahda baabuurta iyo hantida maguurtada ah.

16. 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):

Waxyaabaha kale ee taageeraya codsigaaga ayaa ah (sharrax kharashaadka caafimaad ee aan caadiga ahayn, xaaladaha degdegga ah, sababaha lacagta qoysku aanad u heli karin, ama duruufaha kale ee kaa caawinaya Garsooraha inuu fahmo xaaladdaada): _____

Saxeexidda warqadan dhaarta, waxaan caddaynayaa in bayaanadan ay run yihiin iyadoo loo eegayo ciqaabta been abuurka. Waan fahamsanahay haddii aan ku siiyo macluumaad been ah foomka inay horseedi karto dacwado dambiyeed. Waxaan fahamsanahay in ku guuldareysiga fulinta foomka ama ku guuldareysiga bixinta macluumaadka ama diiwaanada la codsaday ay keeni karto diidmada mooshinkeysiga si loo sii wado In Forma Pauperis. Waxaan oggolaanayaa in xaqiiqooyinka ku jira Qoraalkan Dhaarta lagu xaqiijin karo qaab kasta oo loo baahdo.

Taariikhda/Dated: _____

Saxeexa/Signature

Degmada iyo gobolka lagu saxeexay

Name: _____

Magaca:

Address: _____

Cinwaanka:

City/State/Zip: _____

Magaalada/Gobolka/Zip:

Telephone: (_____) _____

Telefoon:

Email address: _____

Cinwaanka iimayl: