## INSTRUCTIONS FOR FILING A PETITION UNDER A PAUPER'S OATH

You have requested to file your petition with the Juvenile Court as under a pauper's oath. This means that you have stated to the court that you cannot afford to pay the filing fee in this matter and are requesting that it be waived due to your inability to pay. The waiver of a filing fee does not mean that you will not be charged with court costs at petition finalization or litigation taxes and service of process fees at initial filing.

You have a right to file your petition, however, a judge must first determine if you qualify to proceed with your case under a pauper's oath. If the court determines that you are indigent then you can proceed under your pauper's oath without paying the filing fee but you will be responsible for any litigation tax or service of process fees. If you are determined not to be indigent you will be required to pay all fees before your case is processed. You also have the right to file a request for a hearing if the court determines that you are not indigent based on the paperwork you file.

In order to proceed with your petition you must first complete the **OATH OF POVERTY AND AFFIDAVIT OF INDIGENCY.** If you do not complete and sign these forms it will delay the court reviewing your application.

**PLEASE BE ADVISED** You must completely fill out each form with correct information. "N/A" is not a correct response. If you are unemployed you must write that. If the answer is "0" or "none" write that. If you do not complete the required forms or leave blanks or incomplete responses your request might be denied.

Your request will be reviewed by a judge or magistrate. If approved your petition will be processed and you will be given a court date at which time you will be responsible for litigation taxes and service of process fees. If it is denied you must pay the all fees before your petition will be processed again if your request is denied you have the right to request a hearing before a judge or magistrate.

I ACKNOWLEDGE THAT I HAVE READ OR BEEN READ THESE INSTRUCTIONS AND	THAT I
UNDERSTAND THEM.	

AFFIANT			

## Re: Public Defender Financial Eligibility Guidelines

The following income guidelines should be utilized in determining eligibility for Public Defender representation, effective immediately:

Regular Income			Maximum Income				
YOU MUST USE THESE FIGURES			A I E	APPLICANT'S IN NCOME <u>AND</u> SI EXIST (SEE BEL	ČEEDS MAXIMU	DS REGULAR MSTANCES	
					MAXIMUM	MAXIMUM	MAXIMUM
FAMILY UNIT SIZE	WEEKLY INCOME	MONTHLY INCOME	YEARLY INCOME		WEEKLY INCOME	MONTHLY INCOME	YEARLY INCOME
1	362	1,568.75	18,825		579	2,510.00	30,120
2	491	2,129.17	25,550		786	3,406.67	40,880
3	621	2,689.58	32,275		993	4,303.33	51,640
4	750	3,250.00	39,000		1,200	5,200.00	62,400
5	879	3,810.42	45,725		1,407	6,096.67	73,160
6	1,009	4,370.83	52,450		1,614	6,993.33	83,920
7	1,138	4,931.25	59,175		1,821	7,890.00	94,680
8	1,267	5,491.67	65,900		2,028	8,786.67	105,440
Each additional add	129	560.42	6,725		207	896.67	10,760

## IN THE JUVENILE COURT OF DAVIDSON COUNTY, TENNESSEE

		Petition No:
	Petitioner,	
vs.		File No:
	 Respondent	TCSES No:
	OATH OF P	OVERTY
I,	, do solemnly sw	ear under penalties of perjury, that owing to
my poverty, I am r	not able to bear the expense of the	ne action which I am about to commence, and
that I am justly ent	itled to the relief sought, to the	best of my belief.
This	day of,	·
Petitioner		
Sworn to and Subs	scribed before me this day	of
Clerk / Deputy	Clerk	

Juvenile Court Davidson County Tennessee

## UNIFORM AFFIDAVIT OF INDIGENCY

**Case Number** 

Full Name:	3. Telephone Number:	rndents:  Relation Phone number is:  eral income and social securit money from the following so  per month  per month  per month	nship:ship:ship:ship:ship:sty taxes, are deducted, is: \$surces (if expecting include beginning SSI \$substitute	per week / month.  ng date):  per month  per month
Bate of Birth:	A. Date of Birth:  5. Names and Ages of All Depe  6. I am employed by:  My employer's address and p  7. My Present income, after fed  8. I receive or expect to receive  AFDC  Retirement  Unemployment  Other  9. My expenses are: Rent/House Payment  Groceries  Electricity  Water  Gas  5.  Fransportation  5. Names and Ages of All Depe	rndents:  Relation Relation Relation Relation Relation Relation Relation Relation Relation Phone number is:  eral income and social securit money from the following so  \$ per month \$ per month \$ per month	ty taxes, are deducted, is: \$	per week / month.  ng date):  per month  per month
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NOTICE: If the judge determines that based upon your affidavit you are not eligible to proceed under a pauper's oath, you have the right to a hearing before a judge or magistrate.

Legal Authority: Tenn. Rule Sup. Ct. 13