

1 Code: 1030
2 Name: _____
3 Address: _____
4 Telephone: _____
5 Email: _____
6 Self-Represented Litigant

7 IN THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
8 IN AND FOR THE COUNTY OF WASHOE

9
10 _____,
11 Plaintiff / Petitioner, Case No. _____
12 vs. Dept. No. _____
13 _____,
14 Defendant / Respondent.

15
16 AFFIDAVIT OF POVERTY IN SUPPORT OF
17 MOTION TO PROCEED INFORMA PAUPERIS

18 I declare, under the penalty of perjury under the law of the State of Nevada, that the assertions
19 of this affidavit are true and correct, in support of my Motion to Proceed Informa Pauperis:

- 20 1. I am the Plaintiff/Petitioner **-OR-** Defendant/Respondent in the above entitled case.
21 2. I am unable, because of my financial poverty, to pay the costs and fees of this case, and I am
22 unable to give security for the costs and fees in this matter.
23 3. I cannot pay the filing fee because I lack sufficient income, assets, or other resources to pay
24 the amount necessary.
25 4. I wish the Court to consider this Affidavit of Poverty in Support to my Motion to Proceed
26 Informa Pauperis.
27 5. Including myself, there are _____ adults and _____ children in my household.
28 The age(s) of the child(ren) is/are _____, _____, and _____.
(How many) (How many)
(Age) (Age) (Age)

1 6. My total monthly income before taxes is:

2 Employment _____ \$ _____
3 (Name of employer & position)

4 Self-Employment _____ \$ _____
5 (Describe)

6 Social Security \$ _____

7 Child Support \$ _____

8 Alimony/Spousal Support \$ _____

9 State/County Benefits, etc. \$ _____

10 All other household income from
11 another member of the household \$ _____

12 Total income \$ _____

13 7. The following represents a list of my assets and their values:

14 Automobile

15 _____ \$ _____ \$ _____
16 (Make, model, year) (Value) (Loan Balance, if any)

17 Mobile Home, House, Other Real Estate

18 _____ \$ _____ \$ _____
19 (Size, type, and/or year of property) (Value) (Loan Balance, if any)

20 Bank Accounts

21 _____ \$ _____ \$ _____
22 (Bank name and type of account) (Value) (Loan Balance, if any)

23 Other Property (Real or Personal)

24 _____ \$ _____ \$ _____
25 (Describe) (Value) (Loan Balance, if any)

26 //

27 //

28 //

29 //

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28

8. My total monthly expenses are:

Rent or Mortgage	\$ _____
Phone, gas, electricity, and other utilities	\$ _____
Food	\$ _____
Child care	\$ _____
Insurance	\$ _____
Medical	\$ _____
Transportation	\$ _____
Other	\$ _____
Total expenses	\$ _____

This document does not contain the personal information of any person as defined by NRS 603A.040.

I declare, under penalty of perjury under the law of the State of Nevada, that the foregoing is true and correct.

Date: _____ Your Signature: _____
 Print Your Name: _____

State of Nevada
County of _____

This instrument was acknowledged before me on

_____ by _____.
