

**MOTION TO PROCEED  
INFORMA PAUPERIS  
(General Jurisdiction)**

The District Court Filing Office is  
located on the first floor at:

75 Court Street

Reno, NV 89501

[www.washoecourts.com](http://www.washoecourts.com)

## Motion to Proceed Informa Pauperis

CAREFULLY READ ALL INSTRUCTIONS BEFORE STARTING TO FILL OUT ANY OF THE FORMS.

Use **black or blue ink only**. Neatly print or type the information requested.

Do not use correction fluid/tape on the forms.

This packet contains the following forms:

1. Motion to Proceed Informa Pauperis
2. Affidavit of Poverty in Support of Motion
3. Request for Submission

### **ATTENTION:**

If you cannot afford filing fees, under certain circumstances the law allows the court to waive the **filing fees** and the **service fees**.

A determination of being found informa pauperis is not automatic.

**This waiver does not include fees and costs for jury fees or a peremptory challenge.**

To be considered for the waiver, you must show the court that you are indigent and cannot afford the fees. The following motion to proceed informa pauperis and affidavit of poverty must be filled in completely and accurately. If you leave out any information, the court may not consider your request.

The penalty for willfully making a false statement under penalty of perjury is a minimum of 1 year, and a maximum of 4 years in prison, in addition to a fine of not more than \$5,000.00. N.R.S. §199.145.

INSTRUCTIONS: STEP 1

Complete the Motion to Proceed Informa Pauperis as Shown:

1) Print your name, mailing address, telephone number, and email address.

2) Print the name of the Plaintiff, Defendant, the Case No. and Department No. just as they appear on all other documents in this case. If you are filing a new case leave the Case No. and Department No. blank.

3) Date and sign the document.

1 Code: 2385  
2 Name: \_\_\_\_\_  
3 Address: \_\_\_\_\_  
4 Telephone: \_\_\_\_\_  
5 Email: \_\_\_\_\_  
6 Self-Represented Litigant

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

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

15  
16 MOTION TO PROCEED INFORMA PAUPERIS

17 Pursuant to NRS 12.015, and based on the following Affidavit of Poverty, I move for  
18 permission from this Court to proceed with the filing of documents without costs and fees and issue  
19 any necessary writ, process, pleading or paper without charge, and that the Sheriff or any other  
20 appropriate public officer within the State make personal service of any necessary writ, process,  
21 pleading or paper without charge for the said applicant. I request the Court grant the above-entitled  
22 motion because I lack sufficient financial ability to proceed without this waiver.

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

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

27 Date: \_\_\_\_\_ Your Signature: \_\_\_\_\_  
28 \_\_\_\_\_ Print Your Name: \_\_\_\_\_

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Please make sure the address you provide to the court is an address where you receive mail. The order granting or denying the motions and all necessary documents will be mailed to the address given.

1 Code: 2385  
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 MOTION TO PROCEED INFORMA PAUPERIS

17 Pursuant to NRS 12.015, and based on the following Affidavit of Poverty, I move for  
18 permission from this Court to proceed with the filing of documents without costs and fees and issue  
19 any necessary writ, process, pleading or paper without charge, and that the Sheriff or any other  
20 appropriate public officer within the State make personal service of any necessary writ, process,  
21 pleading or paper without charge for the said applicant. I request the Court grant the above-entitled  
22 motion because I lack sufficient financial ability to proceed without this waiver.

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

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

27 Date: \_\_\_\_\_ Your Signature: \_\_\_\_\_

28 Print Your Name: \_\_\_\_\_

INSTRUCTIONS: STEP 2

**Complete the Affidavit in Support of Motion to Proceed Informa Pauperis as Shown:**

1) Print your name, mailing address, telephone number, and email address.

2) Print the name of the Plaintiff, Defendant, the Case No. and Department No. just as they appear on all other documents in this case. If you are filing a new case leave the Case No. and Department No. blank.

3) Fill out pages 1-3, following the prompts in each section.

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

7 IN THE SECOND JUDICIAL DISTRICT  
8 IN AND FOR THE COUNTY OF CLATSOP

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

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

17

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 \_\_\_\_\_.  
(Age) (Age) (Age)

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Please make sure the address you provide to the court is an address where you receive mail. The order granting or denying the motions and all necessary documents will be mailed to the address given.

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 8. My total monthly expenses are:

2 Rent or Mortgage \$ \_\_\_\_\_

3 Phone, gas, electricity, and other utilities \$ \_\_\_\_\_

4 Food \$ \_\_\_\_\_

5 Child care \$ \_\_\_\_\_

6 Insurance \$ \_\_\_\_\_

7 Medical \$ \_\_\_\_\_

8 Transportation \$ \_\_\_\_\_

9 Other \$ \_\_\_\_\_

10 Total expenses \$ \_\_\_\_\_

11  
12 This document does not contain the personal information of any person as defined by  
13 NRS 603A.040.

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

16 Date: \_\_\_\_\_

Your Signature: \_\_\_\_\_

17 Print Your Name: \_\_\_\_\_

18  
19 State of Nevada  
20 County of \_\_\_\_\_

21 This instrument was acknowledged before me on

22 \_\_\_\_\_ by \_\_\_\_\_.

23  
24 \_\_\_\_\_  
25  
26  
27  
28



INSTRUCTIONS: STEP 3

Complete the Request for Submission as Shown:

1) Print your name, mailing address, telephone number, and email address.

2) Print the name of the Plaintiff, Defendant, the Case No. and Department No. just as they appear on all other documents in this case. If you are filing a new case, leave the Case No. and Department No. blank.

3) Fill out the date the documents were filed.

4) Date, sign, and print your name on the document.

1	Code: 3860
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	Plaintiff / Petitioner, Case No. _____
11	_____
12	vs. Dept. No. _____
13	_____
14	Defendant / Respondent.
15	_____
16	<u>REQUEST FOR SUBMISSION OF MOTION</u>
17	I request that the Motion to Proceed Informa Pauperis, which was filed on _____
18	and all other documents filed herein be submitted to the Court for decision. (Date filed)
19	This document does not contain the personal information of any person as defined by
20	NRS 603A.040.
21	I declare, under penalty of perjury under the law of the State of Nevada, that the foregoing is
22	true and correct.
23	Date: _____ Your Signature: _____
24	Print Your Name: _____
25	
26	
27	
28	

REV 8/2017 JCB 1 IFP REQUEST FOR SUBMISSION

1 Code: 3860  
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 REQUEST FOR SUBMISSION OF MOTION

17 I request that the Motion to Proceed Informa Pauperis, which was filed on \_\_\_\_\_  
18 and all other documents filed herein be submitted to the Court for decision. (Date filed)

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

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

23 Date: \_\_\_\_\_

Your Signature: \_\_\_\_\_

24 Print Your Name: \_\_\_\_\_

## INSTRUCTIONS: STEP 4

### **Copying and Filing the Documents:**

You will need to make a copy of the in forma pauperis and the affidavit of poverty along with any necessary copies of the pleadings or papers you wish to have the filing fees and the service fees waived.

A copy machine is available at the Law Library located on the first floor of the courthouse at 75 Court Street, Reno, NV (to the left of the Filing Office). There is a per page charge to use the copy machine. Cash only.

Take the originals and copies of all documents to the Filing Office to be filed. The Filing Office will file the in forma pauperis paperwork and keep the original and copies of all documents to be filed.

The Filing Office is located on the first floor of the courthouse at **75 Court Street, Reno, NV.**

**You will receive an order either granting or denying the motion to proceed in forma pauperis.**

*If the in forma pauperis is granted* the court will file the documents for you. The file stamped copies will be mailed to the address you provided to the court.

*If the in forma pauperis is denied* the documents will not be filed. The originals and copies will be mailed to the address you provided to the court. If you wish to file your documents the filing fee must be paid at the Filing Office. You can call the Filing Office to confirm the fee amount at (775) 328-3110 extension 7.

**-OR-**

The most current Filing Fee schedule is available at [www.washoecourts.com](http://www.washoecourts.com)

**Legal Assistance**

The information in this packet is provided as a courtesy only. This packet is not a substitute for the advice of an attorney. Counsel is always recommended for legal matters.

If you do not have an attorney, you are encouraged to seek the advice of a licensed attorney or visit the Family Division Self Help Center which is located at One South Sierra Street, Reno, NV. **The Self Help Center cannot give legal advice** but can give information regarding court procedures.

You may also wish to speak with a family law lawyer at no cost through the Law Library's "Lawyer in the Library" program, or to seek assistance from other free or reduced-cost legal resources in the area, to include:

**LAWYER IN THE LIBRARY**

First Floor (to the left of the filing office) of the courthouse located at:  
75 Court Street, Reno, NV.  
(775) 328-3250

**[www.washoecourts.com/lawlib](http://www.washoecourts.com/lawlib)**

Tuesday Evenings - Arrive by 4:25 p.m.

\*Please Note\* The program is limited to 10 participants each evening.

**NEVADA LEGAL SERVICES**

204 Marsh Avenue Reno, NV 89509  
(775) 284-3491– leave message if  
necessary

<http://nlslaw.net>

**WASHOE LEGAL SERVICES**

299 S. Arlington Avenue Reno, NV 89501  
(775) 329-2727 – leave message if  
necessary

<http://www.washoelegalservices.org>