

**IN THE CHANCERY COURT OF TENNESSEE FOR THE
THIRTIETH JUDICIAL DISTRICT AT MEMPHIS**

REQUEST TO POSTPONE FILING FEES AND ORDER
(UNIFORM CIVIL AFFIDAVIT OF INDIGENCY T.C.A. § 20-12-127)

In the Chancery Court of Shelby County,

Plaintiff

vs.

Docket # _____

Defendant

I, _____, ("Affiant") having been duly sworn according to law, make oath that I am a resident of Tennessee, and because of my poverty, I am unable to bear the expenses of this case and that I am justly entitled to the relief sought to the best of my belief. The following facts support my poverty:

1. Full Name: _____
2. Address: _____
3. Telephone number: _____ 4. Date of birth: _____
5. Names and ages of all dependents:

_____	_____	Relationship	_____
_____	_____	Relationship	_____
_____	_____	Relationship	_____
_____	_____	Relationship	_____
_____	_____	Relationship	_____

6. I am employed by: _____
My employer's address is: _____
My employer's telephone number is: _____

7. My present income, after federal income and social security taxes are deducted, is
\$ _____ per week or \$ _____ per month.

8. I receive, or expect to receive, money from the following sources:

AFDC	\$ _____	per month beginning	_____
SSI	\$ _____	per month beginning	_____
Retirement	\$ _____	per month beginning	_____
Disability	\$ _____	per month beginning	_____
Unemployment	\$ _____	per month beginning	_____
Worker's Comp	\$ _____	per month beginning	_____
Other	\$ _____	per month beginning	_____

9. My expenses are:

Rent/house payment	\$ _____	per month
Groceries	\$ _____	per month
Electricity	\$ _____	per month
Water	\$ _____	per month

Gas \$ _____ per month
 Transportation \$ _____ per month
 Medical/Dental \$ _____ per month
 Telephone \$ _____ per month
 School supplies \$ _____ per month
 Clothing \$ _____ per month
 Child Care/Court-ordered child support \$ _____ per month

10. Assets:
 Automobile \$ _____ per month (Fair market value)
 Checking/Savings Account \$ _____ per month
 House \$ _____ per month (Fair market value)
 Other \$ _____ per month

11. My debts are:
 Amount owed To Whom

I hereby declare, under the penalty of perjury, that the forgoing answers are true, correct and complete and that I am financially unable to pay the costs of this action.

 Plaintiff

Sworn to and subscribed before me this ____ day of _____, 20 ____.

Seal _____
 Notary/Deputy Clerk

ORDER ON DETERMINATION OF INDIGENCY

It appears, based on the Affidavit of Indigency filed in this cause and after due inquiry made, that Affiant:

- is an indigent resident of Tennessee and is qualified to proceed in this case on a pauper's oath.
- is not an indigent person eligible to file upon a pauper's oath because: _____

IT IS SO ORDERED AND ADJUDGED this the _____ day of _____, _____.

 Chancellor

NOTICE: If the Chancellor 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 the Chancellor.