DISTRICT OF COLUMBIA COURT OF APPEALS

Financial Information Statement (In Forma Pauperis)

Applicant's Name		Case No	
MY MONTHLY INCO (If your pay changes con item 1 should be your average)	siderably from mo	nth to month, each of the ammonths.)	ounts reported in
			Φ.
			\$
b. My payron dedu	ections are (specify	purpose and amount):	•
(1)			\$
(3)			
(4)		,	<u> </u>
My TOTAL payroll dedu	ction amount is:		\$
N 6 (11 (1	1	• 1)	ф
c. My monthly take-home pay is (a. minus b.):			
support, child support, scho unemployment, veterans pa	larships, retiremer yments, dividends	(specify source and amount, into or pensions, social security, and net rental income)	y, disability,
The total amount of other r	noney is:		\$
e. MY TOTAL MC	\$		
	living in my home g in your home, inc	: luding your spouse, who dep nd in whole or in part for sup	
Name	Age	Relationship	Gross Monthly Income
1			\$
J			— Ψ
The TOTAL amount of	fincome from other	ers living in my home is	\$

	PERTY . I own or have an interest in the following property:		
	Cash:	\$	
	Bank accounts: Cars:	\$_	
	Stocks	\$ —	
	Real estate (identify each property and note the fair market value and any loan balance):	φ —	
		\$ \$	
		\$	
f.	Other personal property (describe below):	\$	
4. MY N	MONTHLY EXPENSES. My monthly expenses are the following:		
a.	Rent/house payment & maintenance		\$
b.	Food & household supplies.		\$
c.	Utilities and telephone		\$
d.	Clothing		\$
e.	Laundry and cleaning		\$
f.	f. Medical/dental payments		\$
g.	g. Insurance (life, health, accident)		\$
h.	School and child care required for employment		\$
i.	i. Court-ordered child or spousal support		\$
j	j Transportation and auto expenses (insurance, gas, repair)		\$
k.	Installment payments (specify purpose and amount)		
	(1)	\$	
	(2)	\$	
	(3)	\$	
1.	Amounts deducted due to wage assignments and earnings earnings withholding orders:		\$
m	. Other expenses (specify):		
	(1)	\$	
	(2)	\$	
	(3)	Φ	
n.	My Total monthly expenses are (add a. through m.)		\$

5. Other facts that support this application are (describe unusual medical needs, expenses for recent family emergencies, or other unusual circumstances or expenses to help the court understand your budget; if more space is needed, attach a page labeled Attachment 5):