

**AFFIDAVIT AND APPLICATION TO  
PROCEED IN FORMA PAUPERIS  
(Child Support or Visitation Contempt)**

**IN THE DISTRICT COURT OF \_\_\_\_\_ COUNTY, NEBRASKA**  
(county where original action filed)

\_\_\_\_\_,  
(name of person listed as plaintiff in original action)

**Plaintiff,**

**Case No. CI \_\_\_\_\_**  
(case number assigned by Clerk of Court)

vs.

\_\_\_\_\_,  
(name of person listed as defendant in original action)

**Defendant.**

**AFFIDAVIT AND APPLICATION TO  
PROCEED IN FORMA PAUPERIS  
(Child Support or Visitation Contempt)  
(Request to Proceed Without  
Payment of Fees)**

STATE OF NEBRASKA )  
 ) ss:  
COUNTY OF \_\_\_\_\_ )  
(county where signed)

The undersigned, being first duly sworn on oath, deposes and says that:

1. I am the party requesting the Court for an Order to Show Cause (Child Support or Visitation Contempt), and I am of lawful age.

2. I bring this action in good faith, and I am entitled to redress.

3. I am unable to pay the cost of litigation, including the cost of service, and am unable to provide security.

4. I have a net income of only \$ \_\_\_\_\_  
(your net monthly income)  
per month, derived from \_\_\_\_\_,  
(i.e., employment, public benefits, Social Security, etc.)

and I support a household of \_\_\_\_\_ people.  
(number of people you support)

5. My only assets or resources, over which I have control or possession, are:

Cash on hand.....	\$ _____
Bank accounts .....	\$ _____
Vehicles.....	\$ _____
Real estate .....	\$ _____
Securities, stocks, bonds .....	\$ _____
Tools, equipment.....	\$ _____
Jewelry .....	\$ _____
Other .....	\$ _____
<b>TOTAL.....</b>	<b>\$ _____</b>

6. My necessary estimated monthly expenses are:

Rent or house payment.....	\$ _____
Utilities (Electricity, natural gas, propane) .....	\$ _____
Telephone.....	\$ _____
Automobile payment (monthly).....	\$ _____
Automobile insurance (monthly) .....	\$ _____
Gasoline for vehicle .....	\$ _____
Auto upkeep and repair.....	\$ _____
Doctor, dentist, medicines.....	\$ _____
Food .....	\$ _____
Cable TV, internet, etc.....	\$ _____
Clothing, dry cleaning, laundry .....	\$ _____
Haircuts .....	\$ _____
Church.....	\$ _____
Entertainment.....	\$ _____
Personal care items .....	\$ _____
Other (Credit cards, etc.).....	\$ _____
<b>TOTAL.....</b>	<b>\$ _____</b>

7. Other financial circumstances of which I would like the court to be aware:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. I believe that my living expenses wholly absorb my income, and that I have no assets which can be liquidated.

**WHEREFORE**, pursuant to Neb.Rev.Stat. §§ 25-2301 to 25-2310, I request that the Court authorize me to proceed *in forma pauperis* and direct \_\_\_\_\_  
(name of county where original action filed)  
County, Nebraska, to pay my costs, including service fees and other expenses related to this action and waive provision of security.

\_\_\_\_\_  
Your Signature Date \_\_\_\_\_

\_\_\_\_\_  
Your Full Name

\_\_\_\_\_  
Your Full Street Address/P.O. Box

\_\_\_\_\_  
City/State/ZIP Code

\_\_\_\_\_  
Phone E-mail Address

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public