

**FINANCIAL STATEMENT FOR APPLICATION TO PROCEED
IN CUSTODY/VISITATION CASE WITHOUT FILING FEES
OR FOR ASSESSMENT OF GUARDIAN AD LITEM COSTS**

Case No.

Commonwealth of Virginia VA. CODE § 19.2-159

I am requesting that the court find that I am unable to pay filing fees or costs pursuant to Va. Code § 16.1-267(C) or § 16.1-69.48:5.
The following information is true and provided in support of my request:

- I currently receive the following type(s) of public assistance: TANF \$ Medicaid
 Supplemental Security Income \$ SNAP (food stamps) \$
 Other (specify type and amount)

Names and address of employer(s) for myself and for my spouse (if my household member):

Self
 Spouse (not applicable if alleged victim)

NET INCOME:	Self	Spouse	
Pay period (weekly, every second week, twice monthly, monthly)	
Net take home pay (salary/wages, minus deductions required by law)	\$	
Other income sources (please specify)	\$	
TOTAL INCOME	= COURT USE ONLY A

ASSETS:

Cash on hand .....	\$ .....	.....
Bank Accounts at: .....	\$ .....	.....
Any other assets: (please specify) .....	\$ .....	.....
..... with a value of .....	\$ .....	.....
Real estate – \$ NET VALUE	\$ .....	.....
..... with a value of .....	\$ .....	.....
..... YEAR AND MAKE	\$ .....	.....
Motor Vehicles: .....	\$ .....	.....
..... with a value of .....	\$ .....	.....
..... YEAR AND MAKE	\$ .....	.....
Other Personal Property: (describe) .....	\$ .....	.....
TOTAL ASSETS	\$ .....	.....	= COURT USE ONLY B

..... Number in household I have financial responsibility for, including myself.

EXCEPTIONAL EXPENSES (Total Exceptional Expenses of Family)

Medical Expenses (list only unusual and continuing expenses)	\$	
Court-ordered support payments/alimony	\$	
<input type="checkbox"/> deducted from paycheck <input type="checkbox"/> not deducted from paycheck		
Child-care payments (e.g. day care)	\$	
Other (describe):	\$	
TOTAL EXPENSES	\$	= COURT USE ONLY C
		= COURT USE ONLY C
		= COURT USE ONLY C

I hereby state that the above information is correct to the best of my knowledge.

.....
 DATE SIGNATURE PRINTED NAME

Sworn/affirmed and signed before me this day.

.....
 DATE SIGNATURE TITLE

FOR NOTARY PUBLIC'S USE ONLY:

State of City County of
 Acknowledged, subscribed and sworn to before me this day of, 20

.....
 NOTARY REGISTRATION NUMBER NOTARY PUBLIC
 (My commission expires:)

ORDER (if applicable)

The request to proceed without payment of filing fees is granted denied.
 If this application is denied, the case will not be set for hearing until the applicable fee is paid to the clerk.

.....
 DATE JUDGE