

# AFFIDAVIT OF SUBSTANTIAL HARDSHIP

Court Case Number

IN THE \_\_\_\_\_ COURT OF \_\_\_\_\_, ALABAMA  
(Circuit, District, or Municipal) (Name of County or Municipality)

STYLE OF CASE: \_\_\_\_\_ v. \_\_\_\_\_  
(Plaintiff(s), State of Alabama, City of \_\_\_\_\_) (Defendant(s))

OR In the Matter of \_\_\_\_\_, a child.

TYPE OF PROCEEDING: \_\_\_\_\_

**CIVIL/JUVENILE/CHILD-SUPPORT (CV, DV, DR, SM, JU, CS) CASE** -- I, because of financial hardship, am unable to pay the fees and costs in this case. I request that payment of these fees and costs be waived initially and taxed as costs at the conclusion of the case. (Note: This form does not apply to DOCKET fees in CV, DV, DR, and SM cases. Form C-10D should be completed to request a waiver of prepayment of these docket fees).

**CRIMINAL (CC, DC, TR, Municipal) CASE** -- I, because of financial hardship, am unable to hire an attorney and request that the court appoint one for me and/or am unable to pay the fees and costs in this case and request that payment of these fees and costs be waived initially and taxed as costs at the conclusion of the case. **CHARGE(S):**  
\_\_\_\_\_

**APPEALED/POST-CONVICTION CASE** -- I, because of financial hardship, am unable to hire an attorney and request that the court appoint one for me. (Note: Relating to appealed cases, this box only applies to appeals to the Alabama Court of Criminal Appeals or the Alabama Court of Civil Appeals or petitions for writs of certiorari to the Supreme Court of Alabama).

**DELINQUENCY/CHILD-IN-NEED OF SUPERVISION (JU) CASE** -- I, because of financial hardship, am unable to hire an attorney to represent me/my child. I request that an attorney be appointed to represent me/my child.  
**CHARGE(S):** \_\_\_\_\_

**DEPENDENCY/TERMINATION-OF-PARENTAL-RIGHTS (JU) CASE** -- I, because of financial hardship, am unable to hire an attorney to represent me. I request that an attorney be appointed to represent me.

**CIVIL/JUVENILE/CHILD-SUPPORT (CV, DV, DR, SM, JU, CS) CASE** (such as paternity, contempt, waiver of parental consent for abortion, juvenile mental commitment) -- I, because of financial hardship, am unable to hire an attorney to represent me. I request that an attorney be appointed to represent me.

## AFFIDAVIT

### SECTION 1.

#### 1. IDENTIFICATION

Full Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Spouse's Full Name (if married) \_\_\_\_\_  
Complete Home Address \_\_\_\_\_  
Number of People Living in Household \_\_\_\_\_  
Telephone Number (Cell) \_\_\_\_\_ (Home) \_\_\_\_\_ (Other) \_\_\_\_\_  
State & Last 4 Digits of Driver License's Number \_\_\_\_\_ Last 4 Digits of Social Security Number \_\_\_\_\_  
Employer's Name & Address \_\_\_\_\_ Employer's Telephone Number \_\_\_\_\_

#### 2. ASSISTANCE BENEFITS

Do you or anyone residing in your household receive benefits from any of the following sources? (if so, please check those which apply)

Temporary Assistance for Needy Families (TANF) \_\_\_\_\_ Food Stamps \_\_\_\_\_ Medicaid \_\_\_\_\_  
Social Security Income (SSI) \_\_\_\_\_ Other \_\_\_\_\_

#### 3. INCOME/EXPENSE STATEMENT

Monthly Gross Income:

Monthly Gross Income \$ \_\_\_\_\_  
Spouse's Monthly Gross Income (unless a marital offense) \$ \_\_\_\_\_  
Other Monthly Earnings: Commissions, Bonuses, Interest Income, etc. \$ \_\_\_\_\_  
Monthly Contributions from Other People Living in Household \$ \_\_\_\_\_  
Monthly Unemployment / Worker's Compensation, Social Security, Retirements, etc. \$ \_\_\_\_\_  
Other Monthly Income (be specific) \$ \_\_\_\_\_  
**TOTAL MONTHLY GROSS INCOME** \$ \_\_\_\_\_

**AFFIDAVIT OF SUBSTANTIAL HARDSHIP**

**Court Case Number**

Monthly Expenses:

- A. Living Expenses
  - Rent/Mortgage \$ \_\_\_\_\_
  - Total Utilities: Gas, Electricity, Water, etc. \$ \_\_\_\_\_
  - Food \$ \_\_\_\_\_
  - Clothing \$ \_\_\_\_\_
  - Health Care/Medical Insurance \$ \_\_\_\_\_
  - Car Payment(s)/Transportation Expenses \$ \_\_\_\_\_
  - Loan Payment(s) \$ \_\_\_\_\_
  - Credit Card Payment(s) \$ \_\_\_\_\_
  - Educational/Employment Expenses \$ \_\_\_\_\_
  - Other Expenses (be specific) \_\_\_\_\_ \$ \_\_\_\_\_

**Subtotal** \$ \_\_\_\_\_

B. Child Support Payment(s)/Alimony (Subtotal) \$ \_\_\_\_\_

C. Exceptional Expenses (Subtotal) \$ \_\_\_\_\_

**TOTAL MONTHLY EXPENSES (add subtotals from A, B & C monthly only)** \$ \_\_\_\_\_

**Total Gross Monthly Income Less Total Monthly Expenses** \$ \_\_\_\_\_

4. Assets

Cash on Hand/Bank (or otherwise available such as stocks, bonds, certificates of deposit) \$ \_\_\_\_\_

Equity in Real Estate (value of property less what you owe) \$ \_\_\_\_\_

Equity in Personal Property, etc. (such as the value of motor vehicles, stereo, VCR, furnishing, jewelry, tools, guns, less what you owe) \$ \_\_\_\_\_

Other (be specific) \$ \_\_\_\_\_

Do you own anything else of value? Yes No  
 (land, house, boat, TV, stereo, jewelry)

If so, describe \_\_\_\_\_ \$ \_\_\_\_\_

Total Assets \$ \_\_\_\_\_

5. Affidavit/Request

I swear or affirm that the answers are true and reflect my current financial status. I understand that a false statement or answer to any question in the affidavit may subject me to the penalties of perjury. I authorize the court or its authorized representative to obtain records of information pertaining to my financial status from any source in order to verify information provide by me. I further understand and acknowledge that, if the court appoints an attorney to represent me, the court may require me to pay all or part of the fees and expenses of my court-appointed counsel, in addition to all or part of the costs associated with this case.

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

(Judge/Clerk/Notary)

\_\_\_\_\_  
 (Affiant's Signature)

\_\_\_\_\_  
 (Print or Type Name)