

IN THE SUPERIOR COURT OF CARROLL COUNTY
STATE OF GEORGIA

Plaintiff

v.

Civil Action File No. _____

Defendant

POVERTY AFFIDAVIT

Comes now _____ [Name] Plaintiff in the above styled action,
_____ (name of petition),
being first duly sworn, deposes and says:

1. That I, by reason of my poverty, am unable to pay the cost required by O.C.G.A §15-6-77 to file a civil case, in the Court of Carroll County.
2. That I am _____ years of age, and my monthly household income is \$ _____. A copy of my last two pay stubs/unemployment checks is attached.
3. That I live at _____,
and pay \$ _____ per month as mortgage/rent.
4. My household consists of _____ number of people.
5. That I pay the following bills each month:

| (Name of Bill) | (Amount of Bill) |
|----------------|------------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

6. That I hereby request that I be able to proceed in this action without having to pay filing fees and associated costs.

Respectfully submitted, this _____ day of _____, 20__.

Plaintiff *pro se*

Address: _____

Telephone Number: _____ - _____ - _____

Sworn and subscribed before me

This _____ day of _____, 20__.

Notary Public, State of Georgia

My Commission Expires _____.

**IN THE SUPERIOR COURT OF CARROLL COUNTY
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ORDER

This Court, having considered the Plaintiff's request to file a _____
_____ (name of petition) in **forma pauperis**,
hereby grants the request.

SO ORDERED this ____ day of _____, 20__.

JUDGE, Carroll County Superior Court
Coweta Judicial Circuit