

STOCKBRIDGE-MUNSEE TRIBAL COURT

Mohican Nation

Stockbridge-Munsee Community

AFFIDAVIT OF INDIGENCY

1. This court has jurisdiction over the subject matter and parties in this pursuant to Article _____ of the constitution of the Stockbridge-Munsee Community and Sections _____ of the Stockbridge-Munsee Tribal code.
2. I am the _____ in the above entitled action.
3. On information and belief, I am entitled to the redress sought in this action.
4. Because of poverty, I am unable to pay the costs of this action or to give security to these costs.

Applicants Name _____ Social Security Number _____ Date of Birth _____

INCOME AND ASSETS:

Applicant's & spouse's sole income (check all that apply):

W-2 SSI(E) Relief Other

Applicant:

Wage Income

Name & Phone or Address of Employer:

INCOME:

Weeks Left

Weekly Gross:

Unemployment Compensation #Weeks Left

Weekly: \$

Other (self-employed, SSDI; SS, etc.)

Unemployed

Name and Address of Last Employer:

Date Last Employed:

MARITAL STATUS: Single/Widowed Married Divorced

Spouse:

If neither applicant nor spouse is employed (and neither receives other income):

How do you support yourself?

Name:

Phone:

LIQUID ASSETS OR APPLICANT AND SPOUSE:

A. Cash

B. Checking/Savings Account/Trust Funds Bank:

C. Stocks and Bonds: Specify:

D. Retirement Acct/Cash Value of Life Insurance: Explain:

E. Funds Owed Applicant/Spouse: Explain:

F. Other: Specify:

NONE-LIQUID ASSETS OF APPLICANT AND SPOUSE VALUED AT 1/4 EQUITY

Note: Only include those assets valued at \$500.00 or more

A. House, other real estate: Value:

Lender?:

B. Car(s) - Year, make, value:

Lender?:

C. Other: (truck, snowmobile, motorcycle, etc.) Value:

D. Electronics/collections/other: Value:

Total Income and Assets:

EXPENSES - COST OF LIVING

Family # - Check Exemption

\$ 992.00

\$1760.00

\$2068.00

\$2468.00

\$2832.

Total Income, Expenses, Assets, minus family exemptions:
