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AFFIDAVIT IN SUPPORT OF APPLICATION FOR PROCEEDING IN CUSTODY OR VISITATION CASE WITHOUT PAYMENT OF FILING FEES

Commonwealth of Virginia VA. CODE § 16.1-69.48:5

..... [ ] Circuit Court
[ ] Juvenile and Domestic Relations District Court

In re: .....

The undersigned applicant requests the court to permit the applicant to proceed with a custody or visitation proceeding in this court without the payment of filing fees. In support of this application, the applicant states that the following information is true:

1. The undersigned applicant is a Virginia resident.
2. The following financial information applies to the applicant:
   a. Receiving public assistance [ ] No [ ] Yes-See items checked below
      [ ] Medicaid [ ] Supplemental security income [ ] TANF [ ] SNAP (Food stamps)
   b. Take-home pay $ ..... per [ ] week [ ] every second week [ ] twice a month [ ] month
   c. Other income, if any (specify sources and amounts):
      .....
   d. Assets Cash on hand $ ..... Bank accounts $ .....
   e. Exceptional Expenses (Total Exceptional Expenses of Family)
      Medical Expenses (List only unusual and continuing expenses) $ .....
      Court-ordered support payments/alimony $ .....
      Child Care payments $ .....
      Other (Describe on reverse) $ .....
3. Other information
   a. The number of people for whom the applicant provides support is: .....
   b. The number of persons residing with the applicant is: .....

..... _____
DATE SIGNATURE – APPLICANT

..... NAME OF APPLICANT

Acknowledged, subscribed and sworn to before me this day:

..... _____
DATE [ ] CLERK [ ] DEPUTY CLERK [ ] INTAKE OFFICER

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

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

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