**IN THE**

**SUPREME COURT OF THE REPUBLIC OF PALAU**

**TRIAL DIVISION**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CIVIL ACTION NO**.\_\_\_\_\_\_\_\_\_\_

IN THE MATTER OF: :

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:

:

**REQUEST FOR WAIVER OF THE FILING FEE; AND AFFIDAVIT IN SUPPORT THEREOF**

Deceased. :

:

:

:

:

:

Petitioner. :

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ :

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the Plaintiff/Petitioner in the above captioned matter, respectfully request a waiver of the filing fee for this case to proceed, as I am unable to afford said fee. In support of my request, I hereby state the following:

1. **Present Employer:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If not presently employed, state last employer and date employment ended)

1. **Income Information During Last Twelve (12) Months** (After Taxes):

|  |  |  |
| --- | --- | --- |
|  | Plaintiff/Spouse | Plaintiff/Petitioner’s Spouse |
| Wages |  |  |
| Government Assistance  (SS, Pension and etc.) |  |  |
| Rent Payments/Interest |  |  |
| Gifts or Inheritance |  |  |
| Other Income |  |  |
| Loans |  |  |

1. **Personal/Household Monthly Expenses:**

|  |  |
| --- | --- |
|  | Amount in $ |
| Food |  |
| Rent |  |
| Utilities (electricity, water) |  |
| Telephone |  |
| Fuel |  |
| Child Support |  |

1. **Personal Assets:**

|  |  |
| --- | --- |
|  | Amount in $ |
| Cash on hand or in the bank |  |
| Land or buildings |  |
| Cars |  |
| Boats or other equipment |  |
| Businesses |  |
| Other assets |  |

1. **Personal Debts:**

|  |  |
| --- | --- |
|  | Amount in $ |
| Mortgage |  |
| Loans |  |
| Charge Cards |  |
| Other |  |

1. **Dependents:**

|  |  |  |
| --- | --- | --- |
| Name | Age | Relationship |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

I further certify that I am filing this request in good faith and not for any improper purpose, and by signing below, I declare under the penalty of perjury that the above information is true and correct to the best of my knowledge.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Plaintiff/Petitioner (Print & Sign)

Address:

Telephone:

Subscribed and sworn to or affirmed before on this \_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Clerk of Court / Notary Public

My Commission Expires:\_\_\_\_\_\_\_\_\_\_\_

**IN THE**

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**TRIAL DIVISION**

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**CIVIL ACTION NO**.\_\_\_\_\_\_\_\_\_

IN THE MATTER OF :

:

:

:

Deceased. :

:

**O R D E R**

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Petitioner. :

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ :

Before the Court is Plaintiff/Petitioner’s Request For Waiver of the Filing Fee and Affidavit in Support Thereof. After reviewing said Request, IT IS HEREBY ORDERED that the Request is:

\_\_\_\_\_\_\_\_GRANTED. Plaintiff/Petitioner is exempted from paying the filing fee.

\_\_\_\_\_\_\_\_DENIED. Any filing fee now due in this case must be paid within 14 days of service of this Order. If the filing fee is not paid, the case will be automatically disposed.

So ORDERED this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Presiding Justice/Justice