

IN THE DISTRICT COURT OF SHAWNEE COUNTY, KANSAS

)	
Plaintiff,)	
)	
vs.)	Case No. _____
)	
)	
Defendant.)	

POVERTY AFFIDAVIT and AFFIDAVIT OF UNDUE HARDSHIP

I, _____ am unable to pay a docket fee in this matter by reason of poverty and the payment of the Judicial Branch Surcharge will impose an undue hardship on me. Pursuant to K.S.A. 60-2001(b)(2), the following information is provided in support.

Employment: I am ☐ employed; ☐ not employed.

My employer is:

My employer's address is:

Income: I receive income from the following other sources (**list amount per week**):

Employment income (after withholdings) is: \$ _____

Rental income: \$ _____

Interest and / or dividends: \$ _____

Spousal support and / or child support: \$ _____

Retirement, pension, social security: \$ _____

Disability, workers compensation: \$ _____

Unemployment benefits: \$ _____

Other Income (Describe) _____ \$ _____

TOTAL weekly income from all sources: \$ _____

Assets on Hand: I presently have the following assets (list value):

Cash (including bank accounts and electronic accounts):

\$ _____

Automobile, truck or other vehicle:

\$ _____

Real property (home, building or land):

\$ _____

Other assets (jewelry, watches, etc.):

\$ _____

Other Assets: Are you a beneficiary of any current estate, trust, annuity, or life insurance policy? If so, please provide the details.

Other Reasons: Explain any other facts or reasons why you cannot afford to pay the full amount of the docket fee in your case.

I, _____, declare under penalty of perjury that the information set forth in this affidavit is true and correct and that, by reason of my poverty, I am unable to pay the docket fee and that the payment of the Judicial Branch Surcharge will impose an undue hardship on me.

Executed on _____ day of _____, 20____.

Signature of Movant