

HAMILTON COUNTY MUNICIPAL COURT  
HAMILTON COUNTY, OHIO

STATE OF OHIO : CASE NO. \_\_\_\_\_  
 Plaintiff :  
 -vs- : AFFIDAVIT OF INDIGENCY  
 :  
 \_\_\_\_\_ :  
 Defendant :

After being duly cautioned and sworn, I hereby state the following information is true to the best of my knowledge and belief. I understand I am subject to criminal charges for providing false information.

I.	<b>INCOME</b>	<b>Net Monthly Pay</b>
	1. Employer _____ yrs. ____ mos. ____ Position _____ Spouse's employer _____	_____ _____
	2. Alimony/child support received	_____
	3. Public benefits received (ADC, SS, SSI, WC, etc.)	_____
	4. Other income (pension, interest, etc.)	_____
	<b>TOTAL INCOME</b>	_____
II.	<b>ASSETS</b>	
	1. Cash on hand \$ _____	
	Cash in bank \$ _____	
	Cash at home \$ _____	<b>TOTAL CASH</b> _____
	2. Own motor vehicle Y/N	
	Make _____ Year _____	Value _____
	3. Own house Y/N How long? _____	Value _____
	4. Other property Y/N	Value _____
III.	<b>MAJOR DEBTS</b>	<b>Monthly Payments</b>
	_____	_____
	_____	_____
IV.	<b>FAMILY COMPOSITION</b>	
	1. Number of persons you are required to support	_____
	2. Ages of such persons	_____
	3. Their relationship to you (spouse, child, parent, etc.)	_____

I further state I am indigent at this time; unable to pay the expungement application fee in the within matter; and, hereby request an indigency hearing before the Court.

\_\_\_\_\_  
Defendant

Sworn to before me, and subscribed in my presence, this \_\_\_\_ day of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
Deputy Clerk