

**BUTLER COUNTY COURT OF COMMON PLEAS  
DIVISION OF DOMESTIC RELATIONS  
BUTLER COUNTY, OHIO**

\_\_\_\_\_  
**Plaintiff/Petitioner/1<sup>st</sup> Petitioner**

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
**Defendant/Respondent/2<sup>nd</sup> Petitioner**

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Date of Birth

\*\*\*\*\*

I state that I am the (check appropriate party status)  Plaintiff/Movant or  Defendant  
in the above titled proceeding. In support of my request to proceed without being required to prepay fees and  
costs, I state that because of my poverty, I am unable to pay the costs of said proceeding and I believe I am  
entitled to relief. I understand that if the waiver is granted it applies to the current filing only.

In further support of this application, I submit the attached affidavit.

I state under penalty of perjury that the foregoing is true and correct.

Case No: \_\_\_\_\_

Date: \_\_\_\_\_

**EX PARTE APPLICATION & ENTRY  
TO PROCEED *IN FORMA PAUPERIS*  
WITH AFFIDAVIT AND  
SUPPORTING DOCUMENTATION**

I request permission to waive filing fees for:

- Complaint for Divorce
- Petition for Dissolution
- Motion
- Objection to Magistrate's Decision
- Objection to Administrative Order
- Other:

**ORDER TO THE CLERK:**

The application is **DENIED**. The Clerk shall NOT  
accept the filing without advance payment of the proper  
costs.

The application is **GRANTED**. The Clerk shall accept  
the filing without advance payments of costs. The Court  
reserves taxing of costs to the final determination of the  
matter.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Judge/Magistrate Domestic Relations Division

\_\_\_\_\_  
Date

**BUTLER COUNTY COURT OF COMMON PLEAS  
DIVISION OF DOMESTIC RELATIONS  
BUTLER COUNTY, OHIO**

Case No:

In the matter of:

AFFIDAVIT IN SUPPORT

Indigency of

\_\_\_\_\_  
Applicant's Name

REQUEST TO PROCEED  
*IN FORMA PAUPERIS*

\*\*\*\*\*

**INSTRUCTIONS: In order for the Domestic Relations Division to properly consider your application, you must answer each question below and provide the information requested. No application will be considered until it is fully completed. If necessary, attach additional pages.**

1. Are you currently employed? Yes \_\_\_\_ No \_\_\_\_

a) If you answered "Yes"

i. What is the name and address of your employer?

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

ii. How much do you earn per month (gross before taxes)?

\_\_\_\_\_

b) If you answered "No"

i. Have you ever been employed? Yes \_\_\_\_ No \_\_\_\_

If "Yes," what was the last year and month you were employed?

\_\_\_\_\_

c) How much income have you earned **IN TOTAL** from **ALL SOURCES** over the past 12 months?

\_\_\_\_\_

2. What is your marital status?

Single \_\_\_\_ Married \_\_\_\_ Widowed \_\_\_\_ Divorced \_\_\_\_

Living/cohabitating with fiancé/partner in a domestic relationship \_\_\_\_

a) If you answered "Married" or "Living/cohabitating with fiancé/partner in a domestic relationship"

i. Is your spouse the opposing party in this case? Yes \_\_\_\_ No \_\_\_\_

ii. Is your spouse/fiancé/partner employed? Yes \_\_\_\_ No \_\_\_\_

If "Yes," how much does your spouse/fiancé/partner earn (gross amount) each month?

\_\_\_\_\_

3. Do you have any dependents? Yes \_\_\_\_ No \_\_\_\_

a) If you answered "Yes," list each dependent's name, age, and relationship to you.

Name	Age	Relationship
_____		
_____		
_____		

4. Who else lives in your household?

a) List each household member's name, age, and income.

Name	Age	Income
_____		
_____		
_____		

5. Within the past twelve (12) months, have you received any income from a business, profession or other form of self-employment, or in the form of rent payments, interest dividends, retirement benefits, annuity payments or any other source, including Workers Compensation, Social Security payments, disability payments? Yes \_\_\_\_ No \_\_\_\_

a) If you answered "Yes," describe each source of income and the total amount you received from that source over the twelve month period.

Source	Amount
_____	
_____	
_____	

6. Do you, your spouse/fiancé/partner, or other household member have any cash on hand or money in a savings, checking or other account in your name or held for you by a third person?

Yes \_\_\_\_ No \_\_\_\_

a) If you answered "Yes," state the combined total amount.

\$ \_\_\_\_\_

7. Do you, your spouse/fiancé/partner, or other household member own any real estate, stocks, bonds, notes, automobiles or any other valuable property? Yes \_\_\_\_ No \_\_\_\_

a) Does any third party or entity hold any of the above assets for your benefit?

b) If you answered "Yes," describe each asset and state its value.

Property	Value
_____	
_____	
_____	

8. List all your creditors, including banks, loan companies, charge accounts, personal loans, rent, utilities, child support for other cases, etc ... and the amount you, your spouse/fiancé/partner, or other household member pay each month on each bill or obligation.

Creditor

Monthly Amount Paid

---

---

---

---

9. State your address and a phone number where the court can reach you.

Address

Phone Number

---

\_\_\_\_\_  
Signature of Applicant

Subscribed and duly sworn before me according to law, by the above named applicant this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, at \_\_\_\_\_, County of \_\_\_\_\_, State of Ohio.

\_\_\_\_\_  
Signature of person administering oath

\_\_\_\_\_  
Title (example: Notary, Deputy Clerk of Courts, etc.)