

**IN THE NOOKSACK TRIBAL COURT
FOR THE NOOKSACK INDIAN TRIBE
DEMING, WA**

In re:

DOB(s) _____

Plaintiff(s)/Petitioner(s),

vs

Defendant(s)/Respondent(s).

Case No.:

**MOTION FOR WAIVER OF FILING
FEE**

I _____, file this motion to request the Court waive the filing fee for the above-referenced action because payment of this fee would be a financial hardship. In support of this motion, I provide the following information:

1. My employment status is:

- Employed full time Employed part time Unemployed
 Disabled and unable to work
 Other: _____

2. I have the following assets:

- Cash valued at approximately: \$ _____
 Checking account balance: \$ _____
 Savings account balance: \$ _____
 Auto valued at approximately: \$ _____
 Home valued at approximately: \$ _____
 Other: _____

3. My income source(s) is/are (check all that apply):

- Employment SSI/SSDI TANF General Assistance No Income
 Other: _____

4. My monthly income from all sources is approximately: \$ _____

5. My monthly expenses are approximately: \$ _____

6. Names (or, if under 18 years of age, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:

7. Other information I would like the Court to take into consideration in support of this request:

I declare, under penalty of perjury under the laws of the Nooksack Indian Tribe, that the above information is true and correct. I understand that a false statement may result in a dismissal of my claims.

Date

Party's signature

Print name

Date

Co-Party's signature (if applicable)

Print name