IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA AT _____ Plaintiff, VS. CASE NO. Defendant. REQUEST FOR EXEMPTION FROM **PAYMENT OF FEES, AND ORDER** _____, request exemption from payment of the following fees due to my financial inability to pay: Filing fee for a new action or a motion to modify. Admin. Rule 9(f)(1) Copy fees (including exemplified, certified and regular copy fees). Admin. Rule 9(f)(1) Servicemembers Civil Relief Act attorney fees. Admin. Rule 12(e)(2) FINANCIAL STATEMENT ☐ Within the last year, the court exempted me from paying fees in this case due to my inability to pay. The fee exemption was granted on or about the following date: _____ My financial circumstances have not improved. If you checked this box, skip sections 1 through 5 on this form. I have not been exempted from paying fees in this case or my financial circumstances have improved. If you checked this box, fill out all sections on this form. Phone: _____ Date of Birth: _____ Residence Address: _____ Mailing Address: E-mail Address: Present Employer: (If not now employed, state last employer and date employment ended.) Employer's Employer's Phone: Address: ___ 1. **INCOME INFORMATION** (after taxes, but before other deductions): Income during last 12 months: You Your Spouse a. Wages Public Assistance..... Unemployment..... Other (Specify) TOTAL: b. Current monthly income from all sources:

2.	FAMILY MONTHLY EXPENSES:			
	Food			
	Rent Utilities	-		
	Car payments			
	Furniture & Equipment payments			
	Child support or alimony			
	Loans/Time payments			
	TOTAL EXPENSES:			
3.	FAMILY ASSETS (present value):	4.	FAMILY DEBTS:	
	Cash on hand or		Mortgage	
	in bank		Loans	
	Land, bldgs, trailers		Credit cards	
	Cars		Other (bills, etc.):	
	Snow machines, boats			—
	airplanes or other			
	motor vehicles (except cars)		TOTAL DEBT:	—
	Securities: stocks,		TOTAL DEBT.	—
	bonds, notes			
	Businesses			
	Other Assets:			
	TOTAL ASSETS:			
5.	DEPENDENTS:			
	<u>Name</u>	<u>Age</u>	Relationship	
			<u></u>	
				_
			_	
l ewo	ar or affirm that this financial statement	is true Lunder	etand that if I give false informati	ion
	e financial statement, I may be prosecute		stand that if I give raise informati	OH
	Date	Signa	ature of Plaintiff/Defendant	
Subs on	cribed and sworn to or affirmed before m	ne at	, Alas	ka
	(date)			
(SEAL)		Notary Public/Judge/Court Clerk		
		My Commiss	sion Evnires:	

ORDER

IT IS	ORDERED that the request for exemp	otion from payment of fees is:			
	GRANTED. Plaintiff's/defendant's request for exemption from paying fees is granted.				
	DENIED. Plaintiff's/defendant's request for exemption from paying fees is denied.				
	payment is not made within 30 day	nust be paid before any further action is taken. If s after notice of the order, the court will dismiss the ay file the action again later if you pay the filing fee or O(d).			
	To pay a motion to modify filing fee, go to: http://www.courtrecords.alaska.gov/ep/ep.htm				
	 Date	Judicial Officer			
I certify	/ that on				
	of this order was sent to:	Type or Print Name			
Clerk:					