

IN THE CIRCUIT COURT, FOURTEENTH JUDICIAL CIRCUIT  
OF THE STATE OF FLORIDA, IN AND FOR BAY COUNTY

ADMINISTRATIVE ORDER NO. 96-08

IN RE: Prisoner Affidavit of Indigency in Civil Proceedings

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WHEREAS, the legislature of the State of Florida amended Florida Statute section 57.081 and created Florida Statute section 57.085, and

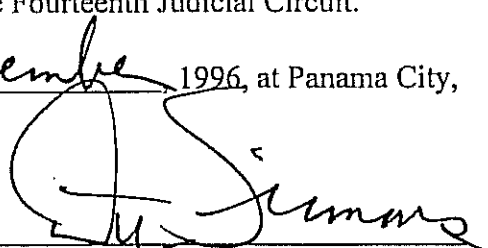
WHEREAS, it is necessary to the efficient administration of the county and circuit courts of the Fourteenth Judicial Circuit that a uniform Prisoner Affidavit of Indigency be utilized by all prisoners filing civil proceedings in the circuit, and

WHEREAS, a "prisoner" for the purpose herein is defined by statute as " a person who has been convicted of a crime and is incarcerated for that crime or who is being held in custody pending extradition or sentencing", and

WHEREAS, a uniform Prisoner Affidavit of Indigency for use in civil proceedings has been approved by the undersigned, a copy of which is attached hereto, it is therefore,

ORDERED AND ADJUDGED that the attached Prisoner Affidavit of Indigency for use in civil proceedings must be used by all prisoners filing civil law suits in the Fourteenth Judicial Circuit. The Clerk of the Court in and for Bay, Calhoun, Gulf, Holmes, Jackson and Washington counties are directed to provide a copy of the attached prisoner affidavit to all prisoners filing for indigency status in civil proceedings. No other Prisoner Affidavit of Indigency shall be accepted in a civil proceeding by the Clerks of the Circuit Court of the Fourteenth Judicial Circuit.

DONE AND ORDERED the 18<sup>th</sup> day of November 1996, at Panama City, Bay County, Florida.

  
DON T. SIRMONS, Chief Judge  
Fourteenth Judicial Circuit

A CERTIFIED TRUE COPY  
HAROLD BAZZEL, CLERK  
OF THE CIRCUIT COURT  
BY Dawn Campbell  
Deputy Clerk

IN THE CIRCUIT COURT OF THE FOURTEENTH JUDICIAL CIRCUIT, IN AND  
FOR \_\_\_\_\_ COUNTY, FLORIDA

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

Division: \_\_\_\_\_

\_\_\_\_\_  
Petitioner

and

\_\_\_\_\_  
Respondent.

\_\_\_\_\_

PRISONER  
AFFIDAVIT OF INDIGENCY  
(Civil Proceedings F.S. 57.085.)

State of Florida  
County of \_\_\_\_\_  
(Name)

BEFORE ME personally appeared, \_\_\_\_\_, who, after being duly  
(prisoner's name)  
sworn, states as follows:

1. I am incarcerated at \_\_\_\_\_  
(name of correctional institution, prison and/or jail)

2. The address of my correctional institution, prison and/or jail is:  
\_\_\_\_\_  
\_\_\_\_\_

3. My inmate identification number is \_\_\_\_\_.

4. The nature and amount of my monthly income is as follows:

Present gross income from employment \$ \_\_\_\_\_

Bonuses, commissions, allowances, overtime, tips, and similar payment \_\_\_\_\_

Business income from sources such as self-employment, partnership, close corporations, and/or independent contracts (gross receipts minus ordinary and necessary expenses required to produce income) \_\_\_\_\_

Disability benefits \_\_\_\_\_

Workers' Compensation \_\_\_\_\_

Unemployment Compensation \_\_\_\_\_

Pension, retirement, or annuity payments \_\_\_\_\_

Social Security benefits \_\_\_\_\_

Interest and dividends \_\_\_\_\_

Rental income (gross receipts minus ordinary and necessary expenses required to produce income) \_\_\_\_\_

Income from royalties, trust, or estates \_\_\_\_\_

Reimbursed expenses and in kind payments to the extent that they reduce personal living expenses \_\_\_\_\_

Gains derived from dealing in property \_\_\_\_\_

Other income (List all other sources of income and the amount) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TOTAL MONTHLY INCOME \$ \_\_\_\_\_

5. My monthly expenses, debts and deductions are as follows:

Deductions:

(A.) Federal, state, and local income taxes (corrected for filing status and actual number of withholding allowances)

(B.) FICA or self-employment tax

TOTAL DEDUCTIONS (add A and B)

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

(C.) Creditors/Debts                      Monthly Payment

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL MONTHLY PAYMENTS FOR DEBTS (add all of column C)

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

(D.) Other monthly expenses: (List each additional monthly expense or debt and the amount)

_____	\$ _____
_____	_____
_____	_____
_____	_____

TOTAL OTHER MONTHLY EXPENSES (add all of column D)

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

GRAND TOTAL FOR ALL MONTHLY EXPENSES (add totals for C and D) \$ \_\_\_\_\_

6. Cash on hand. The following are my bank account balances:

checking account

savings account

money market account

certificate of deposits (CD's)

other cash accounts

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

TOTAL AMOUNT OF CASH

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

7. The following are my other assets, both real property, tangible and intangible:

Description	Value
Stocks/bonds	_____
Notes	_____
Real estate:	
Home:	
_____	_____
Land:	
_____	_____
Other real estate:	
_____	_____
Automobiles:	
_____	_____
_____	_____
_____	_____
Other personal property:	
Contents of home	_____
Jewelry	_____
Life ins./cash	_____
surrender value	_____
Other assets:	
_____	_____
_____	_____
TOTAL	\$ _____

8. My dependants are: (List names and ages)

\_\_\_\_\_

\_\_\_\_\_

9. I hereby **CERTIFY** that I (check one of the following) (\_\_\_\_ have not) or (\_\_\_\_ have been) previously adjudicated indigent pursuant to FL. Statute ch. 57.085 or 57.081.

10. I hereby further **CERTIFY** that I (check one of the following) (\_\_\_\_ have not) or (\_\_\_\_ have been) previously authorized to proceed as an indigent under 28 U.S.C. s. 1915 by a federal court.

11. I hereby **CERTIFY** that I (\_\_\_\_\_ have) or (\_\_\_\_\_ have not) in the proceeding 3 years, been adjudicated indigent twice, under Florida Statutes section 57.085, 57.081, or authorized to proceed as indigent under 28 U.S.C. section 1915, by a federal court.

**NOTE:** If the answer to number 11 is "I have", then you must obtain leave of court before being adjudicated indigent. You must file a request for leave of court and must provide a complete listing of each suit, action, claim, proceeding, or appeal filed in any court or other adjudicatory forum in the proceeding five years. A copy of each complaint, petition or other document purporting to commence a lawsuit and a record of disposition of the proceeding must be attached to the request for leave of court.

**I HAVE ATTACHED TO THIS AFFIDAVIT A PHOTOCOPY OF MY PRISON TRUST ACCOUNT RECORDS FOR THE LAST 6 MONTHS OR FOR THE LENGTH OF MY INCARCERATION, WHICHEVER PERIOD OF TIME IS SHORTER.**

**I AM UNABLE TO PAY COURT COSTS AND FEES. UNDER PENALTY OF PERJURY, I SWEAR OR AFFIRM THAT ALL STATEMENTS IN THIS AFFIDAVIT ARE TRUE AND COMPLETE.**

DATED: \_\_\_\_\_

\_\_\_\_\_  
Signature of prisoner signing affidavit

Printed name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (area code and number) \_\_\_\_\_

Telefax (area code and number) \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF {name} \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me on {date} \_\_\_\_\_, 19\_\_\_\_  
by {name of prisoner} \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC - STATE OF FLORIDA

\_\_\_\_\_  
[Print, type, or stamp commissioned name of notary]

[check one only]

Personally known

Produced identification    Type of identification produced \_\_\_\_\_