

**AFFIDAVIT IN SUPPORT OF APPLICATION FOR
PROCEEDING IN CUSTODY OR VISITATION
CASE WITHOUT PAYMENT OF FILING FEES**

Commonwealth of Virginia VA. CODE § 16.1-69.48:5

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 Circuit Court
 Juvenile and Domestic Relations District Court

In re:

The undersigned applicant requests the court to permit the applicant to proceed with a custody or visitation proceeding in this court without the payment of filing fees. In support of this application, the applicant states that the following information is true:

1. The undersigned applicant is a Virginia resident.
2. The following financial information applies to the applicant:
 - a. Receiving public assistance No Yes-See items checked below
 Medicaid Supplemental security income TANF Food stamps
 - b. Take-home pay \$ per week every second week
 twice a month month
 - c. Other income, if any (specify sources and amounts):
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 - d. Assets Cash on hand \$ Bank accounts \$
 - e. Exceptional Expenses (Total Exceptional Expenses of Family)
Medical Expenses (List only unusual and continuing expenses) \$
Court-ordered support payments/alimony \$
Child Care payments \$
Other (Describe on reverse) \$
3. Other information
 - a. The number of people for whom the applicant provides support is:
 - b. The number of persons residing with the applicant is:

.....
DATE SIGNATURE – APPLICANT
.....
NAME OF APPLICANT

Acknowledged, subscribed and sworn to before me this day:

.....
DATE [] CLERK [] DEPUTY CLERK [] INTAKE OFFICER

FOR NOTARY PUBLIC’S USE ONLY:
State of [] City [] County of
Acknowledged, subscribed and sworn to before me this day of, 20

.....
NOTARY REGISTRATION NUMBER NOTARY PUBLIC
(My commission expires:)

ORDER

The request to proceed without payment of filing fees is [] granted [] denied.

If this application is denied, the case will not be set for hearing until the applicable fee is paid to the clerk.

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DATE JUDGE