

Juvenile Affidavit of Indigence

Juvenile's Name: _____ PID# _____

Charge: _____ Cause No. _____

Please complete the following sections with PARENT INFORMATION

Name: _____
First Middle Last Home Phone Work Phone

Address: _____
Street City State Zip Code Date of Birth S.S.#

Number of Dependents: _____

Name of Employer: _____ Phone# _____

Address: _____ How long: _____ Take home pay \$ _____
Wkly ___ Bi-Wkly ___ Month ___

Spouse Information:

Name: _____

Name of Employer: _____ Phone# _____

Address: _____ How long: _____ Take home pay \$ _____
Wkly ___ Bi-Wkly ___ Month ___

Please indicate any other source of income and the amount: _____

Welfare \$ _____ Medicaid \$ _____ Social Security \$ _____ Retirement \$ _____
Unemployment \$ _____ Disability \$ _____

Home/Apt Rent: _____ or Own _____ Landlord/Mortgage Holder Phone# _____

Bank Name: _____ Checking ___ Savings ___ Balance: _____

Bank Name: _____ Checking ___ Savings ___ Balance: _____

Other (please indicate name of institution, type of account and balance):

Alimony \$ _____ Auto Insurance \$ _____ Auto Payment(s) \$ _____ Auto Model/Yr. _____

Childcare \$ _____ Child Support \$ _____ Credit Cards \$ _____ Food \$ _____
Loans \$ _____ Phone \$ _____ Rent/Mortgage \$ _____ Utilities \$ _____ Other \$ _____

Acknowledgment and Declaration: Under penalty of perjury I hereby certify the foregoing is a complete and accurate statement of my current financial condition. I authorize Montgomery County to conduct a thorough investigation of my statements. I understand this could include verification of all information given and obtaining reports from credit reporting agencies. It is with this understanding and acknowledgements that I formally request an extension of time for payments of fines and court costs now due and payable to Montgomery County.

Parent's Signature Date OID Recommendation