## THE JUDICIAL COURT OF THE TOHONO O'ODHAM NATION

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In Re:

PROCESSING THE FINANCIAL

AFFIDAVIT AND FEE WAIVER FORM

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ADMINISTRATIVE ORDER

No.: 2024-13

The Court establishes the following procedure for the processing of the Financial Affidavit and Fee Waiver form (Fee Waiver). Those applying for a Fee Waiver must fill out the form in its entirety. However, in order to ensure predictability and uniformity in the Court's approval process,

if any box within section 9, Public Assistance, is checked, the judge must approve the waiver.

Those on Public Assistance have met the state or federal government's requirements to qualify for public assistance, therefore there is no need for the Court to do further calculations.

This change only modifies the requirements for the internal processing of the Fee Waiver form and will streamline and clarify the approval process for those receiving any form of public assistance noted on the Fee Waiver form. The applicant must fully complete the entire form.

This Order hereby supersedes and rescinds any conflicting procedures and is effective June 24, 2024.

Dated and entered June 21, 2024.

Rene Alcoverde, Jr., Chief Judge

## IN THE JUDICIAL COURT OF THE TOHONO O'ODHAM NATION \_\_\_\_\_ COURT

	,	) Case	No.:	
Plaintiff/Petitioner, V.  Defendant/Respondent.		) FINANCIAL AFFIDAVIT AND REQUEST ) FOR DEFERRAL, REDUCTION, OR ) WAIVER OF COURT FEES )		
late wh		d sign and date the	form. If you are reque	ferral" and only fill in your name, the esting a waiver or a reduction (with or date the form.
	quest a waiver of all court fee es and submit the following infor		until(0	late) and/or a   50% reduction of all
1.	FULL NAME/S:			
2.	RESIDENCE: Rent Own Live with Family Room/Board			
3.	MARITAL STATUS: Single Married Divorced Separated			
4.	DEPENDENTS (number):			
5.	Average take-home pay: \$   weekly   monthly   every two weeks			
6.	<b>OTHER INCOME:</b> (State monthly amount and source, <i>i.e.</i> , DSS, VA, rent, pensions, spouse income, unemployment, etc.) \$			
7.	ASSETS: (car, home, bank deposits, inmate accounts, bonds, stocks, livestock, etc.)			
8.	OBLIGATIONS: (Itemize monthly rent, other monthly payments, mortgage payments, child support, etc.)  \$			
9.	PUBLIC ASSISTANCE: Please indicate which benefits you currently receive:  General assistance Food Stamps Poverty related veteran's benefits Temporary assistance for needy families (TANF) Medicaid Supplemental security income Other (describe):			
10.	OTHER INFORMATION:			
11.	<b>CERTIFICATION:</b> UNDER PENALTY OF PERJURY, I declare that I have examined the above statement made by me, and to the best of my knowledge, information, and belief swear that each and all are true and correct.			
Print	Name	Signature		Date
Print Name		Jighatule		Date

Date

Signature

Print Name