

CASUSE NO. \_\_\_\_\_

**AFFIDAVIT OF INDIGENCY (RULE T.R.C.P)**

THE UNDERSIGNED MAKES THIS AFFIDAVIT IN CONNECTION WITH THE FILING OF THE ABOVE NUMBERED AND ENTITLED CAUSE WITHOUT THE POSTING OF A SECURITY DEPOSIT AND FOR THE PURPOSE OF HAVING CITATION ISSUED IN ACCORDANCE WITH THE RULE 145 T.R.CP. (THE ITEMS APPLICABLE TO THE UNDERSIGNED ARE CHECKED, AND THE INFORMATION CALLED FOR IS FURNISHED UNDER PENALTIES OF PER JURY).

**1. BASIC FOR INDIGENCY: I AM UNABLE TO PAY A COURT COST DEPOSIT BECAUSE**

- I am presently receiving a Government entitlement based on Indigence, to with:  
(Described nature and amount of Government Entitlement)

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

**2. EMPLOYMENT INFORMATION:**

- I am not employed: the last time I was employed was

\_\_\_\_\_

- I am employed: I work for

\_\_\_\_\_

- The nature of my job is

\_\_\_\_\_

The income I receive from this job \$\_\_\_\_ per\_\_\_\_\_

**3. INCOME FROM SOURCES OTHER THAN EMPLOYMENT:**

- I have no income which is derived from sources other than employment, such as interest, dividends, annuities, etc.  
 I have income derived from sources other than employment, as follows:

TYPE OF INCOME

AMOUNT PER PERIOD

\_\_\_\_\_

\_\_\_\_\_

**4. Spouse's Name:**

- My spouse has no income  
 My spouse has income as follows

TYPE OF INCOME

AMOUNT PER PERIOD

\_\_\_\_\_

\_\_\_\_\_

Statement of Inability

5. PROPERTY:

- I OWN NO PROPERTY AND NO INTEREST IN ANY PROPERTY
- I OWN THE FOLLOWING INTEREST

REAL ESTATE:

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MOTOR VEHICLES:

---

STOCK AND/ OR BONDS:

---

OTHER:

---

CASH:

---

6. BANK ACCOUNTS:

BANK	TYPE OF ACCOUNT	AMOUNT
_____	_____	_____

7. DEPENDENTS:

- I HAVE NO DEPENDENTS
- I HAVE THE FOLLOWING DEPENDENTS

NAME AND AGE	RELATIONSHIP
_____	_____
_____	_____
_____	_____

8. DEBTS:

- I HAVE NO DEBTS
- I HAVE THE FOLLOWING DEBTS:

CREDITOR:	AMOUNT:
_____	_____
_____	_____

SIGNED THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 2020.

Statement of Inability

“I AM UNABLE TO PAY THE COURT COST. I VERIFY THAT THE STATEMENTS MADE IN THIS AFFIDAVIT ARE TRUE AND CORRECT.”

\_\_\_\_\_  
AFFIANT

SWORN AND SUBSCRIBED BEFORE ME THIS \_\_\_\_ DAY OF \_\_\_\_\_, 2020.

\_\_\_\_\_  
NOTARY PUBLIC IN AND FOR  
THE STATE OF TEXAS

\_\_\_\_\_  
MY COMMISSION EXPIRES

\*(ATTORNEY FOR THE AFFIANT MAY CERTIFY THE CONDITIONS UNDER WHICH HE/SHE REPRESENTS THE AFFIANT, ATTACH SEPARATE CERTIFICATE.)

AFFIDAVIT FOR INDIGENCY

THE DEFENDANT IS UNABLE TO PAY A COURT COST SET BY THIS COURT.

\_\_\_\_\_ GRANTED

\_\_\_\_\_ DENIED

\_\_\_\_\_  
JUDGE ROBERTO “BOBBY” QUINTANA  
JUSTICE OF THE PEACE PCT. 2 PL. 1