

Are you currently employed? Yes / No How long employed/unemployed? _____

Highest Grade/Degree completed: _____

In the past ten (10) years, what was your longest term of employment? (employer/job title/how long)

Are you currently still doing that type of work? Yes / No

If no, describe any barriers preventing you from going back to that type of work:

Do you have any physical or mental health conditions that make it difficult for you to work or manage your money? If yes, describe:

List any other reasons you would like the judge to know about why it is difficult for you to earn enough income to pay your fines/fees off:

EXPENSES

List your expenses. The Court may ask you to provide proof of these expenses, so bring proof with you to your cost hearing.

Expense:	Amount:	Last time late (or amount behind):	Expense:	Amount:	Last time late (or amount behind):
Rent/Mortgage	_____	_____	_____	_____	_____
Utilities (Water/Phone/Power)	_____	_____	_____	_____	_____
Car payment	_____	_____	_____	_____	_____
Insurance	_____	_____	_____	_____	_____
Child care/expenses	_____	_____	_____	_____	_____
Medical Bills	_____	_____	_____	_____	_____
Insurance/Prescriptions	_____	_____	_____	_____	_____

List any additional expenses:

Do you pay child support? Yes / No If so, how much per month? _____

Are you behind on child support? Yes / No If so, how much? _____

Do you have to pay any other expenses on these cases (restitution, DA fees, probation fees, drug test fees)? If yes, please describe.

When was the last time you had difficulty paying for food? What did you do?

When was the last time you had difficulty paying for housing? What did you do?

ASSETS

Do you own the following:

Your Home: Yes / No

The land your home is on: Yes / No

Vehicle: Yes / No (With Loan Yes / No)

Bank Accounts: Yes/No Value: _____

Investments (stocks/bonds):	Yes / No
Other land/homes:	Yes / No
More than one vehicle: (Car, truck, motorcycle, Boat, ATV, etc.)	Yes / No

If you answered "Yes" to any of the answers in the box above, please describe this property:

List any additional expenses:

When was the last time you had to sell or pawn something to pay for an expense? Describe what happened.

OTHER INFORMATION

Is there a definite date when your financial situation will improve or worsen? (For example, you will start working on X date, your disability payments will start on X date, or you will lose your housing on X date.) If yes, please describe.

If someone can verify your financial situation, please attach a letter from that person. For example, a case manager at a shelter, a clergy member who provides you with assistance, etc.

I declare under penalty of perjury under the laws of Oklahoma that the foregoing is true and correct to the best of my knowledge and belief.

Date: _____

Respectfully submitted,

Signature

Name

Address

Additional information:

Attached

Not Attached

Phone

