



CIRCUIT COURT  DISTRICT COURT OF MARYLAND FOR \_\_\_\_\_

City/County

Located at \_\_\_\_\_ Case No. \_\_\_\_\_  
Court Address

IN THE MATTER OF: \_\_\_\_\_ VS. \_\_\_\_\_  
Petitioner/Plaintiff Respondent/Defendant

**REQUEST FOR WAIVER OF PREPAID COSTS FOR ASSEMBLING THE RECORD FOR AN APPEAL**

I, \_\_\_\_\_, request that the trial court grant a waiver of prepaid costs for assembling the record. I am unable to prepay the prepaid costs in this matter because of poverty.

Name of Party

Affidavit of Continuing Eligibility

- I respectfully submit that this Court waive the prepaid costs in this matter and
  - I will be represented by the following organization on appeal and am financially eligible for their services (*Attorney signature required below*):
    - Maryland Legal Aid
    - The Office of the Public Defender
    - A lawyer through Maryland legal services provider, \_\_\_\_\_  
Name of Organization/Program
  - The Maryland Legal Services Corporation funds or has otherwise approved that organization to provide civil legal services on behalf of low-income persons; and/or
- There has been no material change in my financial situation since the waiver of prepaid costs was granted.

Affidavit of Income. (Complete this section only if the section above does not apply to you)

I respectfully submit that:

1. There are \_\_\_\_\_ family members living in my household, including myself. (Do not include renters or temporary guests).  
Number
2. The total gross household income (before taxes) is \$ \_\_\_\_\_ (total income earned by all persons in the household) per  WEEK  MONTH  YEAR.
3. The gross household income (before taxes) is from the following sources (*list amounts before taxes*) per  WEEK  MONTH  YEAR:
  - Wages..... \$ \_\_\_\_\_
  - Commissions/Bonuses..... \$ \_\_\_\_\_
  - Social Security/SSI..... \$ \_\_\_\_\_
  - Retirement Income..... \$ \_\_\_\_\_
  - Unemployment Insurance..... \$ \_\_\_\_\_
  - Temporary Cash Assistance..... \$ \_\_\_\_\_
  - Alimony/Spousal Support..... \$ \_\_\_\_\_
  - Rent received from tenants..... \$ \_\_\_\_\_
  - Any Other Income (*Do not include food stamps/SNAP*)..... \$ \_\_\_\_\_

4. I own the following property. (Do not list your home, one vehicle, and/or personal items in your home):

- NONE
- Real estate other than principal home..... Value: \$ \_\_\_\_\_
- Other vehicles including boats..... Value: \$ \_\_\_\_\_
- Bank Accounts..... Balance: \$ \_\_\_\_\_
- Stocks or other securities..... Value: \$ \_\_\_\_\_
- Other property (describe): \_\_\_\_\_ Value: \$ \_\_\_\_\_

5. I owe the following debts:

- NONE
- Credit Card: \_\_\_\_\_ Amount Owed: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_
- Car Loan: \_\_\_\_\_ Amount Owed: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_
- Other Debt: \_\_\_\_\_ Amount Owed: \$ \_\_\_\_\_ Monthly Payment: \$ \_\_\_\_\_

6. Other information to demonstrate my inability to pay the costs:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

For these reasons, I request the trial court grant a waiver of prepaid costs associated with assembling the record.

I understand that I may have to pay these costs at the end of the case, unless the Court grants a final waiver of open costs, and that if I want a final waiver of open costs I must request the waiver at the conclusion of the action.

I affirm under the penalties of perjury that what I have said above is true to the best of my knowledge, information, and belief.

\_\_\_\_\_  
Party Signature

\_\_\_\_\_  
Party Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone / Fax

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Date

Attorney Certification (To be completed by your lawyer, if you are represented). I,

\_\_\_\_\_,  
Name of Attorney  
, certify that to the best of my knowledge, information, and belief,  
the appeal is meritorious, and the client remains eligible for my services on the basis of his or her income.

\_\_\_\_\_  
Attorney Signature

\_\_\_\_\_  
Attorney Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone / Fax

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Date