

Sample for Reference Purposes Only. Forms have bilingual format for your convenience, but must be completed and filed with the court in English. 表格样本，仅供参考。为了提供便利，表格采用双语格式，但向法院提交的表格必须用英语填写。



CIRCUIT COURT 巡回法院 DISTRICT COURT OF MARYLAND FOR 地区法院, 马里兰州 City/County (市/县)

Located at (地址) _____ Court Address (法院地址) vs. Case No. _____ (案件编号)
IN THE MATTER OF (事宜): _____ Petitioner/Plaintiff (原告) Respondent/Defendant (被告)

REQUEST FOR WAIVER OF PREPAID COSTS

预付费豁免申请 (Md. Rule 1-325) 《马里兰州规则》第 1-325 款

I (本人), _____, wish to file a complaint, petition, or other documents which I have completed and attached (希望提交我已经填写和随附的申诉、请愿或其他文档。)

I am unable to prepay the prepaid costs in this matter because of poverty. (我由于贫困无力支付本事项的预付费。)

Affidavit of Income (收入宣誓书)

I respectfully submit that (我郑重地声明):

1. There are (我的家中共有) _____ family members living in my household, including myself (家庭成员 (包括本人)). (Do not include renters or temporary guests.) (请勿包括房客或临时居住的客人。)

2. The total gross household income (before taxes) is (家庭总毛收入 (税前) 为) \$ _____ (total income earned by all persons in the household) (家庭所有成员赚取的总收入) per (每) WEEK (周) / MONTH (月) / YEAR (年).

3. The gross household income (before taxes) is from the following sources (家庭毛收入 (税前) 来自以下来源) (list amounts before taxes) (列出税前数额) per (每) WEEK (周) / MONTH (月) / YEAR (年):

- Wages (工资) \$ _____
- Commissions/Bonuses (佣金/奖金) \$ _____
- Social Security/SSI (社会安全金/补充安全收入 (SSI)) \$ _____
- Retirement Income (退休金) \$ _____
- Unemployment Insurance (失业保险) \$ _____
- Temporary Cash Assistance (临时现金资助) \$ _____
- Alimony/Spousal Support (赡养费/配偶赡养费) \$ _____
- Rent received from tenants (房客支付的租金收入) \$ _____
- Any Other Income (Do not include food stamps/SNAP) (任何其他收入 (不包括粮食券/补充营养资助计划 (SNAP))) \$ _____

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4. I own the following property. (我拥有以下财产。) (Do not list your home, one vehicle, and/or personal items in your home) (请勿列出您自己的住宅、一辆汽车和/或您家中的个人物品):

- NONE (无)
- Real estate other than principal home (除主要住宅外的房地产) ___ Value (价值): \$ _____
- Other vehicles including boats (其他车辆 (包括船只)) _____ Value (价值): \$ _____
- Bank Accounts (银行账户) _____ Balance (余额): \$ _____
- Stocks or other securities (股票或其他证券) _____ Value (价值): \$ _____
- Other property (describe) (其他财产 (请描述)): _____ Value (价值): \$ _____

5. I owe the following debts (我有以下债务):

- NONE (无)
- Credit Card (信用卡): _____ Amount Owed: (欠付数额) \$ _____ Monthly Payment: (月付款) \$ _____
- Car Loan (汽车贷款): _____ Amount Owed: (欠付数额) \$ _____ Monthly Payment: (月付款) \$ _____
- Other Debt (其他债务): _____ Amount Owed: (欠付数额) \$ _____ Monthly Payment: (月付款) \$ _____

6. Other information to demonstrate my inability to prepay the required costs (证明我无力预付所需费用的其他信息):

For these reasons, I request a waiver of the prepaid costs. (因此, 我请求豁免预付费。)

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 in accordance with Maryland Rule 1-325(f)(2)(A). (我理解, 我可能需要在案件结束时支付这些费用, 除非法院批准最终未付费用豁免; 如果我希望申请最终未付费用豁免, 我必须依照《马里兰州法规》第 1-325(f)(2)(A) 款在诉讼结束时申请豁免。)

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I affirm under the penalties of perjury that what I have said above is true to the best of my knowledge, information, and belief. (我确认, 据我所知所信, 我提供的上述信息准确无误, 否则甘愿受作伪证之处罚。)

Party Signature (当事方签名)

Telephone / Fax (电话/传真)

Party Name (当事方姓名)

E-mail (电子邮件)

Address (地址)

Date (日期)

City, State, Zip (城市、州、邮政编码)

Attorney Certification (律师认证)

(To be completed by your lawyer, if you are represented.) (如果您有律师代理, 由您的律师填写。)

I (本人), _____, certify that to the best of my knowledge, information, and belief, there is a good ground for this claim, application, or request for process, and it is not interposed for any improper purpose or delay (证明, 据我所知所信, 本索赔、申请或办理请求有充足的理由, 并非因任何不适当的目的或延期而提出).

Name of Attorney (律师姓名)

On behalf of (代理): _____
Name of Party (当事方姓名)

Attorney Signature (律师签名) CPF ID No. (CPF 身份代码)

Telephone / Fax (电话 / 传真)

Attorney Name (律师姓名)

E-mail (电子邮件)

Address (地址)

Date (日期)

City, State, Zip (城市、州、邮政编码)