



CIRCUIT COURT  DISTRICT COURT OF MARYLAND FOR \_\_\_\_\_ City/County

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

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

**REQUEST FOR WAIVER OF PREPAID COSTS  
(Md. Rule 1-325)**

I, \_\_\_\_\_, wish to file a complaint, petition, or other documents which I have completed and attached. I am unable to prepay the prepaid costs in this matter because of poverty.

Affidavit of Income

I respectfully submit that:

- 1. There are \_\_\_\_\_ family members living in my household, including myself. (Do not include renters or temporary guests).
- 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 prepay the required costs:

.....  
.....  
.....

For these reasons, I request a waiver of the prepaid costs.

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).

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

.....  
Telephone / Fax

.....  
Party Name

.....  
E-mail

.....  
Address

.....  
Date

.....  
City, State, Zip

**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, there is a good ground for this claim, application, or request for process, and it is not interposed for any improper purpose or delay.

On behalf of: .....  
Name of Party

.....  
Attorney Signature

.....  
CPF ID No.

.....  
Telephone / Fax

.....  
Attorney Name

.....  
E-mail

.....  
Address

.....  
Date

.....  
City, State, Zip