



Gun Lake Tribal Court

Chief Judge: Michael Petoskey

2873 Mno Bmadzewen Dr.
Shelbyville, MI 49344

Phone: (269) 397-1630
Fax: (269) 397-1631

CASE NUMBER:

Petitioner: (Name, Address, Phone Number)

Respondent: (Name, Address, Phone Number)

v.

**AFFIDAVIT OF PRIMARY SUPPORT BY PUBLIC ASSISTANCE
AND
REQUEST FOR WAIVER OF FILING FEE**

- I am the Petitioner Respondent in the above captioned matter.
- I respectfully request a waiver of the filing fee because I am primarily supported by public assistance which I have listed below along with other sources of income or support.

Please list all sources of public assistance:

- _____
- _____
- _____
- _____

Please list all other sources of income or support:

- _____
- _____
- _____
- _____

- Number in the household _____. (Family size, including all income earners and legal dependents). List all within the household and indicate if the person is an income earner or dependent.

Name of person living in your household	Income Earner?	Dependent?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

