

Gogebic County
Affidavit of Indigency
for Copies of Public Records

The undersigned requests a copy of the following record from Gogebic County, Gogebic County, Michigan.

Describe record desired:

Pursuant to Section 4(1) of the Freedom of Information Act, the undersigned being first duly sworn deposes and says: **(Fill out either A or B)**

- A. On this date I am receiving public assistance as referred to in the Freedom of Information Act.
- B. I am not receiving public assistance as referred to in the Freedom of Information Act, but I am unable to pay the cost of the copies of records which I have requested and in support of my assertion I show and swear the following facts are true:
1. That I have no funds with which to pay for the copies except \$_____.
 2. That I own no property, real or personal, which could be sold to raise funds with which to pay for the copies except _____.
 3. That I do , do not have a spouse who is dependent upon me for support.
 4. That I do , do not have ___ minor children dependent upon me for their support.
 5. That I owe child support payments in the amount of \$_____ per week to the Friend of the Court and an arrearage of \$_____.
 6. All of my assets do , do not exceed my liabilities. If liabilities exceed assets, they do so by \$_____.

Date: _____ Signed: _____

Subscribed and sworn to before me this ___ day of _____, _____.

Notary Public,
Gogebic County, Michigan
My Commission Expires: _____