

Central Connecticut State University
Affidavit of Indigency: Fee Waiver for Freedom of Information Act Request

Are you an unemancipated minor? Yes ___ No ___. If yes, please have your parent or legal guardian complete this Affidavit.

Are you married? Yes ___ No ___. If yes, please provide information for both you and your spouse, unless you are legally separated.

Full Legal Name: _____

Spouse's Full Legal Name (if applicable): _____

Date of your request for public records under the Freedom of Information Act (FOIA) for which you seek a fee waiver? _____.

Please list below all income earned and assets owned by you at any time during the twelve months prior to the date of your FOIA request.

I. Income (*Net income after taxes; include all sources*)
 Public Assistance Received: No Yes
 (*If yes, specify type*): _____

Net Income \$

II. Assets

	Estimated Value	Debt Owed	Equity
Real Estate	\$	\$	Real Estate \$
Motor Vehicles	\$	\$	Motor Vehicle \$
Other Personal Property	\$	\$	Other \$
Cash on Hand			\$
Savings accounts (<i>Total of all accounts</i>)			Savings \$
Checking accounts (<i>Total of all accounts</i>)			Checking \$
Individual Retirement Accounts			\$
Certificates of Deposit			\$
Stocks: <i>Name</i>			Stock Value \$
Bonds: <i>Name</i>			Bond Value \$
Businesses Owned by You <i>Name</i>	Estimated Value		\$
			Total Assets \$

III. Supporting Documentation:

Attach Supporting Documents including but not limited to your monthly bank and investment account statements, your tax returns for the twelve month period in question, and tax assessments for your real and personal property.

IV. Affidavit

By signing this Affidavit, I swear, under penalty of perjury, that at any time during the 12 months prior to my request for public records under the Freedom of Information Act, I have not owned more than \$500.00 in assets, including but not limited to monies in my bank accounts, monies kept on my person, investments, businesses and real and personal property. I also swear, under penalty of perjury, that the copies of the documents attached hereto are true and accurate copies.

Notice: ▶

Any false statement you make under oath which you do not believe to be true and which is intended to mislead a public servant in the performance of his or her official function may be punishable by a fine and/or imprisonment.

Signed (Applicant)

Print name of person signed at left

Date signed

State of Connecticut

ss: _____

County of _____

Subscribed and sworn to before me
this ___ day of _____, 20 ____

Signature (Notary Public, Commissioner of Superior Court)
My Commission Expires _____