

IN THE CIRCUIT/COUNTY COURT OF THE Fifteenth JUDICIAL CIRCUIT  
IN AND FOR PAINT COUNTY, FLORIDA

Eliot Ivan Bernstein

CASE NO. TBD

Plaintiff/Petitioner or In the Interest Of

vs.

Simon Bernstein Estate

Defendant/Respondent

**APPLICATION FOR DETERMINATION OF CIVIL INDIGENT STATUS**

**Notice to Applicant:** If you qualify for civil indigence you must enroll in the clerk's office payment plan and pay a one-time administrative fee of \$25.00. This fee shall not be charged for Dependency or Chapter 39 Termination of Parental Rights actions.

1. I have 0 dependents. (Include only those persons you list on your U.S. Income tax return.)

Are you Married? ☒ Yes No Does your Spouse Work? ☒ Yes ☐ No Annual Spouse Income? \$ 0

2. I have a net income of \$ 0 paid weekly every two weeks semi-monthly monthly yearly other

(Net income is your total income including salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, minus deductions required by law and other court-ordered payments such as child support.)

3. I have other income paid weekly every two weeks semi-monthly monthly yearly other

(Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No")

Second Job ..... Yes \$ 0.00 No

Social Security benefits

For you ..... Yes \$ no No

For child(ren) ..... Yes \$ no No

Unemployment compensation ..... Yes \$ no No

Union payments ..... Yes \$ no No

Retirement/pensions ..... Yes \$ no No

Trusts ..... Yes \$ unknown No

Veterans' benefits ..... Yes \$ no No

Workers compensation ..... Yes \$ no No

Income from absent family members ..... Yes \$ no No

Stocks/bonds ..... Yes \$ no No

Rental income ..... Yes \$ no No

Dividends or interest ..... Yes \$ no No

Other kinds of income not on the list ..... Yes \$ no No

Gifts ..... Yes \$ no No

I understand that I will be required to make payments for fees and costs to the clerk in accordance with §57.082(5), Florida Statutes, as provided by law, although I may agree to pay more if I choose to do so.

4. I have other assets: (Circle "yes" and fill in the value of the property, otherwise circle "No")

Cash ..... Yes \$ no No

Bank account(s) ..... Yes \$ no No

Certificates of deposit or money market accounts ..... Yes \$ no No

Boats\* ..... Yes \$ no No

Savings account ..... Yes \$ no No

Stocks/bonds ..... Yes \$ na No

Homestead Real Property\* ..... Yes \$ no No

Motor Vehicle\* ..... Yes \$ no No

Non-homestead real property/real estate\* ..... Yes \$ no No

\*show loans on these assets in paragraph 5

Check one: I ☒ DO NOT expect to receive more assets in the near future. The asset is \_\_\_\_\_

5. I have total liabilities and debts of \$ 50,000.00 as follows: Motor Vehicle \$ 0, Home \$ 0, Other Real Property \$ 0, Child Support paid direct \$ 0, Credit Cards \$ 0, Medical Bills \$ \_\_\_\_\_, Cost of medicines (monthly) \$ \_\_\_\_\_, Other \$ 50,000.

6. I have a private lawyer in this case ..... Yes No **NO**

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under s. 57.082, F.S. commits a misdemeanor of the first degree, punishable as provided in s. 775.082, F.S. or s. 775.083, F.S. I attest that the information I have provided on this application is true and accurate to the best of my knowledge.

Signed this 22nd day of May, 20 15  
09/30/1963 c6956008

Date of Birth Driver's License or ID Number

2753 NW 34th St. Boca Raton FL 33434

Address, P O Address, Street, City, State, Zip Code

Signature of Applicant for Indigent Status

Print Full Legal Name

Phone Number: 561-245-8588



**SARAH BARNETT**

MY COMMISSION # EE214537

EXPIRES July 05, 2016

(407) 398-0153

FloridaNotaryService.com

*Sarah Barnett*  
*May 22, 2015*

**CLERK'S DETERMINATION**

Based on the information in this Application, I have determined the applicant to be ( ) Indigent ( ) Not Indigent, according to s. 57.082, F.S.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

Clerk of the Circuit Court by \_\_\_\_\_

This form was completed with the assistance of: \_\_\_\_\_  
Clerk/Deputy Clerk/Other authorized person.

**APPLICANTS FOUND NOT TO BE INDIGENT MAY SEEK REVIEW BY A JUDGE BY ASKING FOR A HEARING TIME.  
THERE IS NO FEE FOR THIS REVIEW.**

Sign here if you want the judge to review the clerk's decision \_\_\_\_\_