DEPARTMENT OF THE ATTORNEY GENERAL

STATE OF HAWAII

State of Hawaii,	A. G. NO.
Petitioner, vs.	DECLARATION IN SUPPORT OF REQUEST TO PROCEED IN FORMA PAUPERIS
(Description of Property)	
Defe	endant.
OWNER(S): (all interest holders' na [NOTE: THIS IS NOT A CLAIM. TO S	nmes) SUBMIT A CLAIM, YOU MUST FOLLOW §712A-10(9), H.R.S.
	OCUMENT WITH THE INFORMATION AS SET FORTH IN
I, [name]	, declare that I am the petitioner in the
above-entitled case; that in support of my p	petition to proceed without being required to post a bond as required for
instituting a judicial review by Section 712	2A-10(9) of the <u>Hawaii Revised Statutes</u> , I state that because of my
poverty, I am unable to pay the costs of sai	id proceeding or to give security therefore; that I believe I am entitled to
relief.	
1. Are you presently employed?	
Yes No	<u> </u>
a. If the answer is "yes," standarders of your employer.	ate the amount of your salary or wages per month, and give the name and
b. If the answer is "no," sta month which you received.	ate the date of last employment and the amount of the salary and wages per
a. Business, profession or f	t twelve months any money from any of the following sources? form of self-employment:
b. Yes b. Rent payments, interest of	
c. Pensions, annuities or lif Yes d. Gifts or inheritances?	No fe insurance payments? No
Yes	No

	e. Any other sources? Yes No
	If the answer to any of the above is "yes," describe each source of money and state the amount received from each during the past twelve months.
3.	Do you own any cash, or do you have money in a checking or savings account? (Include any funds in prison accounts.) Yes No
	If the answer is "yes," state the total value of the items owned.
4.	Do you own real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? Yes No
	If the answer if "yes," describe the property and state its approximate value.
5.	List the persons who are dependent upon you for support, state your relationship to those persons, and indicate how much you contribute toward their support.
I swea	on oath that the foregoing is true and correct.
	Executed on of
	(date) (month) (year)
	(signature)
	(type or print name)
	bed and sworn to before me this day of, 20
Sign	
Print N	ame
	Public; State of Hawaii
My co	nmission expires: