

**PETITION FOR PROCEEDING IN A NO-FAULT DIVORCE
WITHOUT PAYMENT OF FEES OR COSTS**

COMMONWEALTH OF VIRGINIA VA.CODE § 17.1-606

Case No.

..... Circuit Court

..... v.

The undersigned petitioner requests the court to permit the petitioner to proceed in a no-fault divorce case under Virginia Code § 20-91(A)(9) in this court without the payment of fees or costs and to have from all officers all needful services and process. In support of the petition, the petitioner states that the following information is true:

1. I currently receive the following type(s) of public assistance in CITY/COUNTY
- TANF \$ Medicaid Supplemental Security Income \$
- SNAP (food stamps) \$ Other (specify type and amount)
- I currently do not receive public assistance. (If this box is checked, complete section 2, below. If not checked, proceed to section 3.)

2. Names and address of employer(s) for myself and spouse:

Self

Spouse

NET INCOME:

	Self	Spouse	
Pay period (weekly, every second week, twice monthly, monthly)	
Net take home pay (salary/wages, minus deductions required by law)	\$	
Other income sources (please specify)	\$	
			<small>COURT USE ONLY</small>
TOTAL INCOME	\$	+	= A

ASSETS:

Cash on hand	\$	
Bank Accounts at:	\$	
Any other assets: (please specify)			
.....	with a value of	\$
Real estate - \$		\$
<small>NET VALUE</small>			
.....	with net value of	\$
Motor Vehicles {	with net value of	\$
<small>YEAR AND MAKE</small>			
<small>YEAR AND MAKE</small>			
Other Personal Property: (describe)	\$	
			<small>COURT USE ONLY</small>
TOTAL ASSETS	\$	+	= B

..... Number in household I have financial responsibility for, including myself.

EXCEPTIONAL EXPENSES (Total Exceptional Expenses of Family)

Medical Expenses (list only unusual and continuing expenses)	\$	
Court-ordered support payments/alimony	\$	
<input type="checkbox"/> deducted from paycheck <input type="checkbox"/> not deducted from paycheck		
Child-care payments (e.g. day care)	\$	
Other (describe):	\$	
		<small>COURT USE ONLY</small>
TOTAL EXPENSES	\$	= C
COLUMN "A" plus COLUMN "B" minus		
COLUMN "C" equals available funds		=

3. ACKNOWLEDGEMENT

I acknowledge that the foregoing is true and correct. I understand that the court cannot provide me with legal advice, and that it may be advisable to get advice from a lawyer.

.....
DATE SIGNATURE - PETITIONER PRINT NAME - PETITIONER
.....
RESIDENCE ADDRESS OF PETITIONER

.....
SIGNATURE - PETITIONER PRINT NAME - PETITIONER
.....
RESIDENCE ADDRESS OF PETITIONER

Commonwealth/State of

[] City [] County of

The foregoing instrument was subscribed and sworn to/affirmed before me this

..... day of, 20

by
NAME OF APPLICANT

.....
[] CLERK [] DEPUTY CLERK
[] NOTARY PUBLIC
My commission expires:
Registration No.

ORDER

The petition is

[] granted

[] denied

[] and the parties shall

.....
.....

.....
DATE

.....
JUDGE