

State of Minnesota

District Court

County _____

Judicial District: _____
Court File Number: _____
Case Type: General

Plaintiff/Petitioner

vs

**Supplemental Affidavit for
Proceeding In Forma Pauperis (IFP)**
Minn. Stat. § 563.01

Defendant/Respondent

1. I am a party in this action and make this request in good faith.
2. Check one of the following:
 - An order allowing me to proceed *in forma pauperis* without paying filing fees, service and publication fees, and copy fees has previously been issued in this case.
 - OR
 - I have completed and attached an *Affidavit for Proceeding In Forma Pauperis*.
 - OR
 - This is a Conciliation Court case. I have completed an attached an *Affidavit of Inability to Pay*.
3. I am asking for an order directing the payment of the following costs by the state courts:
 - a. Witness/expert witness for: _____
 - Trial Deposition

Name and address of witness: _____

I expect this witness to provide the following evidence or testimony (please give a general description):

I estimate the costs for this witness to be:

CONFIDENTIAL

Subpoena	\$	_____
Service Fee	\$	_____
Mileage	\$	_____
Attendance Fee	\$	_____
Other _____	\$	_____

b. Transcript expenses:
 Date of hearing, trial or deposition: _____

I need a copy of this transcript for the following reasons:

I estimate the costs of obtaining this transcript to be:
 Court reporter fees \$ _____
 Copy fees \$ _____
 Other; _____ \$ _____

c. Other expenses:

These expenses are necessary because:

Estimated costs: \$ _____

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: _____

Signature
 Name: _____

County and state where signed:

Address: _____
 City/State/Zip: _____
 Telephone: (_____) _____
 E-mail address: _____