

IN THE CIRCUIT/COUNTY COURT OF THE 15th JUDICIAL CIRCUIT  
IN AND FOR Palm Beach COUNTY, FLORIDA

Ted Bernstein  
Plaintiff/Petitioner or In the Interest Of  
vs.  
Eliot Bernstein  
Defendant/Respondent

CASE NO. 502014CP003698XX

502012CP004391XXXX  
502015CP001162XXXX  
502011CP000653XXXX  
502014CP003698XXXX  
502014CP002815XXXX  
502015CP002717XXXX  
502014CA014637XXXX

**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 3 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? \$ 7296.00

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 <u>Inventor</u> ..... Yes \$ _____ No <u>(circle)</u>	Veterans' benefits..... Yes \$ _____ No <u>(circle)</u>
Social Security benefits For you..... Yes \$ _____ No <u>(circle)</u>	Workers compensation..... Yes \$ _____ No <u>(circle)</u>
For child(ren)..... Yes \$ _____ No <u>(circle)</u>	Income from absent family members..... Yes \$ _____ No <u>(circle)</u>
Unemployment compensation..... Yes \$ _____ No <u>(circle)</u>	Stocks/bonds..... Yes \$ _____ No <u>(circle)</u>
Union payments..... Yes \$ _____ No <u>(circle)</u>	Rental income..... Yes \$ _____ No <u>(circle)</u>
Retirement/pensions..... Yes \$ _____ No <u>(circle)</u>	Dividends or interest..... Yes \$ _____ No <u>(circle)</u>
Trusts..... Yes \$ _____ No <u>(circle)</u>	Other kinds of income not on the list..... Yes \$ _____ No <u>(circle)</u>
	Gifts..... Yes \$ _____ No <u>(circle)</u>

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 \$ <u>0</u> No <u>(circle)</u>	Savings account..... Yes \$ <u>0</u> No <u>(circle)</u>
Bank account(s)..... Yes \$ <u>0</u> No <u>(circle)</u>	Stocks/bonds..... Yes \$ <u>0</u> No <u>(circle)</u>
Certificates of deposit or money market accounts..... Yes \$ <u>0</u> No <u>(circle)</u>	Homestead Real Property*..... Yes \$ <u>0</u> No <u>(circle)</u>
Boats*..... Yes \$ <u>0</u> No <u>(circle)</u>	Motor Vehicle*..... Yes \$ <u>0</u> No <u>(circle)</u>
	Non-homestead real property/real estate*..... Yes \$ <u>0</u> No <u>(circle)</u>

\*show loans on these assets in paragraph 5

Check one: I  DO DO NOT expect to receive more assets in the near future. The asset is INHERITANCE & ROYALTY

5. I have total liabilities and debts of \$ 28000 as follows: Motor Vehicle \$ \_\_\_\_\_, Home \$ \_\_\_\_\_, Other Real Property \$ \_\_\_\_\_, Child Support paid direct \$ \_\_\_\_\_, Credit Cards \$ \_\_\_\_\_, Medical Bills \$ \_\_\_\_\_, Cost of medicines (monthly) \$ \_\_\_\_\_, Other \$ 28000.

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 13 day of April, 20 16.  
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]  
Signature of Applicant for Indigent Status  
Print Full Legal Name Eliot Bernstein  
Phone Number: 561-245-8588

**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 \_\_\_\_\_