## CITY OF MANOR MUNICIPAL COURT Application and Financial Affidavit for Time Payment Plan

Please COMPLETE ALL information and print legibly. DO NOT LEAVE ANY BLANKS. Today's date is u05.

Last		First	Midd	le		Nickname	
ysical Address:							
	Street		Apt.	City	State	Zip	
ailing Address:							
	Street		Apt.	City	State	zip Zip	
ntact Info:			Hel "				
Н	Iome Phone #	Ce	ell Phone #		Email Address		
te of Birth:	Driver's	License or ID #/Sta	ate:		Social Security	#:	
arital Status: _		# of Deper			ndents Living with You:		
oouse's Name:							
•	Last	Fir	rst	Middle	2	Nickname	
earest Living Re	lative:						
lot Residing Wit	h You) Na	me	Relati	ionship		Phone #	
st of Names, Ad	dresses & Phone Numbe	rs of Two (2) Persor	nal References <u>NOT</u> Rel	ated to You	ı:		
ame	Street Address	Apt.	City & State	Zip	Phone #	Years Known	
ame							
	Street Address Street Address	Apt.	City & State  City & State	Zip	Phone #	Years Known Years Known	
ame							
ame MPLOYMENT	Street Address  INFORMATION:						
ame  MPLOYMENT  nployer:	Street Address  INFORMATION:						
ame  MPLOYMENT  nployer:	Street Address INFORMATION:	Apt.	City & State			Years Known	
MPLOYMENT mployer: Compa	Street Address INFORMATION:	Apt.	City & State	Zip		Years Known	
MPLOYMENT  nployer: Compa	Street Address INFORMATION: any Name	Apt. Position	City & State  Address	Zip Years o	Phone #	Years Known Phone #	
ame  MPLOYMENT  mployer: Compa	Street Address INFORMATION: any Name Take Hom	Apt. Position	City & State  Address	Zip Years o	Phone #	Years Known	
ame  MPLOYMENT  mployer: Compa	Street Address INFORMATION: any Name Take Hom	Apt. Position	City & State  Address	Zip Years o	Phone #	Years Known Phone #	
ame  MPLOYMENT  mployer: Compa	Street Address INFORMATION: any Name Take Home	Apt. Position	City & State  Address  Circle one: we	Zip Years o	Phone #	Years Known  Phone #	
ame  MPLOYMENT  mployer: Compa  upervisor  ourly Wage: \$_ pouse's Employe	Street Address INFORMATION: any Name Take Home	Apt. Position	City & State  Address  Circle one: we	Zip Years o	Phone #	Years Known  Phone #	
ame  MPLOYMENT  mployer: Compa  upervisor  ourly Wage: \$_ couse's Employe	Street Address  INFORMATION:  any Name  Take Homer:  Company Name	Position Position Position	Address  Address  Address	Zip  Years of the ekly/bi-we	Phone #  of Service eekly/monthly Nex	Years Known  Phone #	
MPLOYMENT  MPLOYMENT  mployer: Compa  upervisor  ourly Wage: \$_  upervisor  ourly Wage: \$_	Street Address  INFORMATION:  any Name  Take Hom  Company Name  Take Hom	Position Position Position Position Position	Address  Address  Address  Circle one: we	Years of the Years of Theory of T	Phone #  of Service eekly/monthly Nex	Phone #  Phone #  Phone #	
mployer: Compa upervisor lourly Wage: \$ upervisor lourly Wage: \$	Street Address  INFORMATION:  any Name  Take Home  Company Name  Take Home  Yes No If y	Position ne Pay: \$  Position ne Pay: \$ es, Name of School	Address  Address  Address  Circle one: we	Years of Yea	Phone #  of Service eekly/monthly Nex	Phone #  Phone #  Phone #	
Imployer:  Comparing  Upervisor  Jourly Wage: \$  Upervisor  Upervisor	Street Address  INFORMATION:  any Name  Take Home  Company Name  Take Home  Yes No If y	Position ne Pay: \$  Position ne Pay: \$ es, Name of School ACKNOWLE	Address  Address  Address  Circle one: we  Circle one: we	Years of the Person of the Per	Phone #  of Service eekly/monthly Nex	Phone #  Phone #  Phone #	

payment will immediately default this agreement, and will result in an immediate Capias Pro Fine Warrant issued for my arrest and additional penalties.

STATE LAW requires the court to add an additional \$25.00 time payment fee to every case not paid in full within 30 days. Your total due will increase \$25.00 per case for any case with an outstanding balance after 30 days from the date of judgment.

Defendant's Signature	Clerk Receiving	