

1 Name
2 Address
3 Phone Number

4 PRO SE

5 **IN THE SUPERIOR COURT**
6 **OF THE**
7 **COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS**

8 In the Matter of the Petition for the Change)
9 of Name of:) FCD CN CIVIL ACTION NO. _____
10)
11) MOTION AND ORDER TO
12) PROCEED INFORMA PAUPERIS
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Due to financial difficulties and insufficient funding, I am unable to pay for the court filing fee. Pursuant to 7 CMC §3205 and 8 CMC §1716, I am requesting the court to allow me to proceed with the above entitled action *In Forma Pauperis* or without payment of the court fee.

Dated this ____ day of _____, 20__ .

PETITIONER

On the basis of Petitioner's *In Forma Pauperis Statement* mandated by 7 CMC §3205 (a), and pursuant to 8 CMC §1716, IT IS HEREBY ORDERED that this case proceed in the above entitled action without payment of the court filing fee.

- Granted
- Denied
- Granted Partial Payment: \$ _____
- Other: Petitioner shall make full payment, and payable in Installment of \$ _____ Bi-Weekly/Monthly.

SO ORDERED this ____ day of _____, 20__ .
