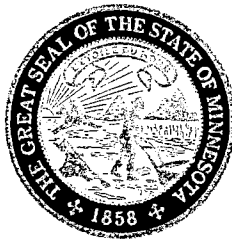


KEVIN W. EIDE  
DISTRICT COURT JUDGE  
  
CARVER COUNTY JUSTICE CENTER  
600 EAST 4TH STREET  
CHASKA, MINNESOTA 55318



CARVER, DAKOTA, GOODHUE, LESUEUR  
MCLEOD, SCOTT AND SIBLEY COUNTIES  
(952) 361-1420  
FAX (952) 361-1491  
REPORTER (952) 361-1441

STATE OF MINNESOTA  
FIRST JUDICIAL DISTRICT

**FILED**

OCT 03 2017

CARVER COUNTY COURTS

October 2, 2017

Mr. Norman Carthens #253506  
Kirkland Correctional Institution  
4344 Broad River Road  
Columbia, SC 29210

RE: Nelson Estate Probate Documents

Dear Mr. Carthens:

The Court has received your correspondence requesting copies of all documents filed in the Estate of Prince Rogers Nelson, Court File No. 10-PR-16-46, because you do not have the ability to access them electronically. As of today, the file contains 2,062 documents. Court administration charges a copying fee of \$10.00 per document. In addition, you would be responsible for the cost of postage. Those costs would need to be determined and paid for in advance. If you are unable to afford the copying and postage fees, and still want the documents, you may be eligible for a fee waiver. The fee waiver request would need to be approved by Judge Eide. I have included the fee waiver request form in case that is an option you would like to pursue.

Sincerely,

Yvonne Shirk  
Law Clerk to the Honorable Kevin W. Eide

CONFIDENTIAL

State of Minnesota

District Court

County

Judicial District:
Court File Number:
Case Type:

Plaintiff/Petitioner

Affidavit for Proceeding In Forma Pauperis

vs / and

(Minn. Stat. § 563.01)

Defendant/Respondent

STATE OF MINNESOTA )
) SS
COUNTY OF \_\_\_\_\_ )

- 1. I am a party in this action. I am a natural person (not a corporation, partnership or other entity). In good faith, I request a court order waiving court fees and costs. I cannot support my family and myself and also pay or give security for costs.
2. I believe that I have valid reasons for pursuing this action. My pleadings (the Petition, Complaint, Answer, Appeal or other pleading) are attached.
3. a. I am receiving public assistance under one or more of the following means-tested programs:
b. I am receiving public assistance under some other means-tested program:
c. I receive Supplemental Security Income (SSI) as a resource for meeting my expenses.
4. I am represented by attorney on behalf of a civil legal services program or volunteer attorney program, based on indigency.
5. My family size is. (Include yourself, your spouse, your minor children, and other dependents in your household.) For my family size, I counted myself and (list all others):

Table with 3 columns: Name, Age, Relationship to you

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6.  My gross **annual** family income (before taxes and deductions) is \$ \_\_\_\_\_ which is less than 125% of the Federal Poverty Line for my family size of \_\_\_\_\_ members. **I have attached proof of my family income or I will provide proof if requested.**

7. My gross **monthly** income before taxes and deductions is \$ \_\_\_\_\_. My net (take home) **monthly** income is \$ \_\_\_\_\_, and the source of that income is:  Job / wages  
 Unemployment     Spousal Support     Trust Income     Social Security  
 Other: \_\_\_\_\_

8. My spouse's gross **monthly** income before taxes and deductions is \$ \_\_\_\_\_  
My spouse's net (take home) **monthly** income is \$ \_\_\_\_\_, and the source of that income is \_\_\_\_\_; OR, I do not know my spouse's income because: \_\_\_\_\_

OR  I am not married.

9. All other family members and dependents living with me have net **monthly** income as follows:

Name of person	Age	Net (take home) monthly income	Source of that Income

10. I receive \$ \_\_\_\_\_ per month in child support (includes medical support and/or child care support).

11. I pay \$ \_\_\_\_\_ per month in court-ordered child support (includes medical support and/or child care support).

12. I pay \$ \_\_\_\_\_ per month in court-ordered spousal support.

13. I pay \$ \_\_\_\_\_ per month for  rent  mortgage payment.

14. I own:

Cash	\$ _____
Checking, savings and credit union accts	\$ _____
Cars, other vehicles (list make, year and equity value [market value minus unpaid loans])	_____
_____	\$ _____
_____	\$ _____
Real Estate (market value minus unpaid mortgage/loans)	
Homestead:	\$ _____
Other Real Estate:	\$ _____
Other personal property (jewelry, stocks, bonds, etc. - list separately)	
_____	\$ _____
_____	\$ _____

15. I am presently \$ \_\_\_\_\_ in debt, excluding car loans and real estate mortgage/loans.

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16. Other factors which support your request are (explain unusual medical expenses, emergencies, reasons that the family money is not available to you, or other circumstances to help the Judge understand your situation): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**By signing this Affidavit, I am certifying that these statements are true under penalty of perjury. I understand that if I provide false information on the form it may lead to criminal charges. I understand that failure to execute the form or failure to provide information or requested records may result in denial of my motion to proceed In Forma Pauperis. I am authorizing that the facts contained in this Affidavit may be verified by any means required.**

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: (     ) \_\_\_\_\_

E-mail address: \_\_\_\_\_