

FILED

UNITED STATES DISTRICT COURT
MIDDLE DISTRICT OF FLORIDA
FORT MYERS DIVISION

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U.S. DISTRICT COURT
MIDDLE DISTRICT OF FLORIDA
FORT MYERS, FLORIDA

Anna Kubit, *pro se* Plaintiff(s),

-v-

Case No.

Google Groups & other websites Defendant(s)
Kira Krumm Interior Design
Nico Samara

AFFIDAVIT OF INDIGENCY

(EACH PLAINTIFF MUST COMPLETE A SEPARATE AFFIDAVIT OF INDIGENCY)

I, Anna Kubit, being first duly sworn, depose and make under oath the following application and affidavit, pursuant to Title 28 USC § 1915, to proceed *in forma pauperis* in the United States District Court for the Middle District of Florida. I am unable to make prepayment of fees and costs or to give security therefor, and it is my belief that I am entitled to redress, and that I have not, for the purpose of avoiding payment of said cost, divested myself of any property, monies, or any items of value.

I. BRIEF STATEMENT OF THE NATURE OF THE ACTION: My statute of limitations is up
and I need to file suit, but currently I have no income apart from the occassional business income. I am
behind on bills and payments and although I would like to pay the court, I do not have adequate funds.
I can try to pay at a later date, but would appreciate it if the fee for filing would be waived as well as other
fees related to the lawsuit. I also would greatly appreciate if counsel could be appointed to help me with
my defamation case (case being filed).

II. RESIDENCE

Affiant's address: 1147 Rainbow Dr.
(Street)
Naples FL 34104 -
(City) (State) (Zip Code)

III. MARITAL STATUS:

1. Single Married Separated Divorced
2. If married, spouse's full name: _____

IV. DEPENDENTS:

1. Number: 0
2. Relationship to dependent(s): _____
3. How much money do you contribute to your dependents' support on a monthly basis?
\$ _____

V. EMPLOYMENT: (Information provided below applies to your present employment or last employment).

1. Name of employer: Konsultar Corporation
a. address of employer: 1147 Rainbow Dr.
(Street)
Naples FL 34104 -
(City) (State) (Zip)
b. State how long affiant has been (was) employed by present (or last) employer?
Years: 2 Months: _____
c. Income: Monthly \$ 500.00 or Weekly: \$ _____
d. What is (was) the affiant's job title? Owner/CEO-President
2. If unemployed, date of last employment: _____
3. Is spouse employed? Yes No If so, name of employer: _____
a. Income: Monthly \$ _____ or Weekly: \$ _____
b. What is spouse's job title? _____
4. Are you and/or your spouse receiving welfare aid? Yes No
If so, amount: Monthly \$ _____ or Weekly \$ _____

VI. FINANCIAL STATUS:

1. Owner of real property (excluding ordinary household furnishings and clothing):
a. Description: House of which I am on title, but being foreclosed upon currently

b. Full address: 1147 Rainbow Dr
 (street)
Naples FL 34104 -
 (City) (State) (Zip)

c. In whose name? Franciszek Kubit (Dad), I am on title

d. Estimated value:		\$	<u>170,000.00</u>
e. Total amount owed:		\$	<u>435,000.00</u>
Owed to:	<u>Collection Agency/Fremont</u>	for	\$ <u>200,000.00</u>
	<u>Collection Agency Fremont</u>	for	\$ <u>235,000.00</u>
f. Annual income from property:		\$	<u>0.00</u>

2. Other assets/property:

a. Automobile: Make Audi Model TT
 In whose name registered: Anna Kubit
 Present value of car: \$ 35,000.00
 Amount owed: \$ 35,000.00
 Owed to: Audi Financial (lease)

b. Total cash in banks, savings and loan associations, prisoner accounts, financial institutions, other repositories, or anywhere else: \$ 250.00

c. List monies received during the last twelve (12) months into your hands, into banks, savings and loan associations, prisoner accounts, other financial institutions, or other sources as indicated below:

Business, profession, or other forms of self employment:	\$	<u>20,000.00</u>
Rent payments, interest, or dividends:	\$	<u>0.00</u>
Pensions, annuities, or life insurance payments	\$	<u>0.00</u>
Gifts or inheritances:	\$	<u>5,000.00</u>
Stocks, bonds, or notes:	\$	<u>0.00</u>
Other sources:	\$	<u>0.00</u>

3. Obligations:

a. Monthly rental on house or apartment:	\$	<u>0.00</u>
b. Monthly mortgage payments on house:	\$	<u>1,500.00</u>

4. Other information pertinent to affiant's financial debts and obligations:

Chase	4,000.00	150.00
(Creditor)	(Total debt)	(Monthly payment)
Providian	2,700.00	100.00
(Creditor)	(Total debt)	(Monthly payment)
Sallie Mae	9,000.00	140.00
(Creditor)	(Total debt)	(Monthly payment)

Other (explain): I am behind with my creditors currently and trying to raise my income so that I can repay my debts and current expenses. But it's hard to do so with the online defamation.

VII. FOR PRISONER AFFIANTS ONLY:

1. Date(s) of incarceration: _____
2. Estimated release or parole date: _____
3. A copy of the prisoner's account statement containing all transactions in affiant's prisoner account for the six (6) months immediately preceding the filing of the Complaint or Petition must accompany this Affidavit. The account statement must be obtained from an authorized official of each prison at which the prisoner is or was confined during this period of time. The account statement must be in the form of a computer printout or bank ledger card prepared by the institution or an account statement prepared by an authorized officer of the institution. **Failure to provide this account statement may result in the dismissal of this action.**

The requirement to submit the account statement does not negate the prisoner affiant's responsibility to ensure that the Affidavit Certificate found on page 6 of this Affidavit of Indigency is also properly executed and filed.

VIII. ALL AFFIANTS MUST READ AND SIGN

I UNDERSTAND that any false statement(s) of a material fact contained herein may serve as the basis of prosecution and conviction for perjury of making false statements. FURTHER, I CERTIFY that all questions contained herein have been answered and are true and correct to the best of my knowledge and belief.

Signature of Affiant

Anna Kubit

STATE OF FLORIDA

COUNTY OF Collier

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 26th DAY OF September

2008, BY Anna Kubit
(Insert name of person acknowledged)

WHO IS PERSONALLY KNOWN TO ME OR WHO HAS PRODUCED FL Driver's License
(State type of identification)

AS IDENTIFICATION AND WHO (DID) (DID NOT) TAKE AN OATH.

[Signature]
NOTARY PUBLIC
MY COMMISSION EXPIRES:
8/9/10

