

IN THE DISTRICT COURT OF _____, ARKANSAS

_____, DATE OF BIRTH _____ PETITIONER
(List all names you have used)

VS. CASE NO. _____

STATE OF ARKANSAS RESPONDENT

PETITION
FOR ALTERNATIVE PUBLIC SERVICE WORK
AND/OR DISMISSAL OF FINES

This is an application for relief filed by your petitioner, the above named, an indigent prisoner and the aggrieved party, to have fines, fees, or court costs imposed by this Court dismissed in lieu of alternative public service work.

1. That this Court has proper jurisdiction.
2. That your petitioner, being without funds, is unable to pay the costs of these proceedings or to employ counsel. Petitioner requests to be allowed to proceed in forma pauperis. (Attached is Affidavit in Support of Request to Proceed In Forma Pauperis.)
3. That your petitioner, the grievant herein, is in custody of the Arkansas Department of Correction under sentence of this Court under Commitment Order of _____, _____, for conviction of a felony, for a term of _____ years imprisonment.
4. That your petitioner was convicted in this Court of a misdemeanor and received a fine of \$ _____ dollars.
5. That your petitioner is financially unable to pay the fines, fees, or costs levied and requests the Court dismiss said fines, fees, or costs in lieu of alternative public service work upon his/her release for such type and for such duration as deemed appropriate by the Court or dismiss said fines because Petitioner is presently incarcerated by the State of Arkansas.

WHEREFORE, Petitioner respectfully prays that this Court:

- A. Grant petitioner leave to proceed in forma pauperis;

- B. Dismiss the fines, fees, or costs levied in lieu of alternative public service work upon his/her release of such type and for such duration as deemed appropriate by the Court, or dismiss said fines outright;
- C. Grant your petitioner a hearing, order your petitioner's presence at such hearing, and appoint counsel for your petitioner, if necessary;
- D. Grant any and all other relief the Court deems proper.

Respectfully submitted,

 Petitioner, pro se
 ADC # _____ Unit _____
 Arkansas Department of Correction
 _____, AR _____
 Date of Birth: _____
(Required)

VERIFICATION

I, _____, the petitioner herein, and in support of my petition after first being duly sworn, do hereby swear that the statements, matters and things contained in my petition herein are a true and accurate account to the best of my knowledge, information and belief and for the purposes therein stated, set-forth and contained.

 Petitioner, pro se
 ADC # _____
 Social Security # _____
(Required)

STATE OF ARKANSAS)
) SS
 COUNTY OF _____)

SUBSCRIBED AND SWORN TO BEFORE ME, a Notary Public, on this ____ day of _____, 20____.

 NOTARY PUBLIC
 My Commission Expires: _____

CERTIFICATE OF SERVICE

I, _____, petitioner herein, do certify that a copy of the foregoing petition has been served on the Prosecuting Attorney of _____ County, Arkansas _____, by placing same in the U.S. Mail with sufficient postage affixed to ensure delivery, on this ____ day of _____, 20____.

Petitioner, pro se

ADC # _____

**ATTATCH COPY OF COMMITMENT ORDER-CANNOT BE PROCESSED WITHOUT
COMMITMENT ORDER**