CAUSE NO.	
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THE STATE OF TEXAS

VS.

AT LAW OF

BOSQUE COUNTY, TEXAS

IN THE COUNTY COURT

<u>QUESTIONNAIRE IN SUPPORT OF</u> <u>REQUEST FOR APPOINTMENT OF COUNSEL FOR JUVENILE</u>

Applicant request a determination of indigency and appointment of counsel under Article 26.04, Texas Code of Criminal Procedure, and herewith submits, under oath, the following concerning him/herself and his/her financial resources.

NAME:	
ADDRESS:	City/State/Zip
WHEN WAS JUVENILE ARRESTED/DETAINE	ED?
WHAT WAS JUVENILE ARRESTED/DETAINE	ED FOR?

LIST ALL OF YOUR/SPOUSES SOURCES OF INCOME

SOURCE OF INCOME	AMOUNT RECEIVED		HOW OFTEN
	\$		
	\$\$		
DO YOU RECEIVE:	A.F.D.C.	¢	
DO TOU RECEIVE.	UNEMPLOYMENT	\$ \$	
	RETIREMENT	\$	
	DISABILITY	\$	
	WORKERS COMP	\$	
	INDIGENT HEALTH	H CARE	

LIST THE PROPERTY YOU OWN AND ITS APPROXIMATE VALUE

Automobiles (#)\$
Land/Houses	\$
Stocks/Bonds	\$
Saving Accounts	\$
Money People Owe You	\$
Jewelry	\$
	\$
	\$

LIST YOUR OUTSTANDING OBLIGATIONS AND NECESSARY LIVING EXPENSES EACH MONTH

Payments to Bank \$	
Payments to Loan Co. \$	
Payments to Friends \$	
Payments to Relatives \$	
Child Support Payments	
\$	
<u>\$</u>	
<u>\$</u>	

Rent/House Payment\$______Food\$_______Clothing\$_______Utilities\$_______Medical\$_______Car Payments\$_______Child Care\$_______\$_______\$_______

ARE YOU SINGLE, MARRIED DIVORCED?
IF MARRIED, DOES YOUR SPOUSE LIVE WITH YOU? () Yes () No
WHERE IS YOUR SPOUSE EMPLOYED?
SPOUSE'S MONTHLY INCOME?
HOW MANY CHILDREN/STEP CHILDREN DO YOU HAVE?
DO THEY LIVE WITH YOU? () Yes () No
WHAT ARE THEIR AGES?
ARE YOU PHYSICALLY DISABLED? () Yes () No
IF SO, HOW?

WARNING: THIS QUESTIONNAIRE MUST BE FILLED OUT COMPLETELY AND MUST BE SIGNED BY YOU UNDER OATH. IN ADDITION, THE COURT MAY REQUIRE THAT YOU ANSWER QUESTIONS ORALLY BEFORE DECIDING WHETHER YOU ARE ENTITLED TO AN APPOINTED ATTORNEY. ANY STATEMENT MADE BY YOU IN THIS QUESTIONNAIRE OR IN RESPONSE TO THE COURT'S QUESTIONS CAN AND WILL BE USED AGAINST YOU IN A TRIAL IN ORDER TO IMPEACH ANY DIRECT TESTIMONY YOU MAY GIVE. IN ADDITION, ANY FALSE STATEMENT MADE BY YOU CAN BE USED TO PROSECUTE YOU FOR PERJURY OR OTHER FALSIFICATION.

YOU HAVE A RIGHT TO THE APPOINTMENT OF COUNSEL IF FORMAL CRIMINAL CHARGES HAVE BEEN BROUGHT AGAINST YOU FOR A FELONY OR ANY CRIME WHERE YOU COULD BE CONFINED UPON CONVICTION,

AND YOU ARE FINANCIALLY UNABLE TO EMPLOY AN ATTORNEY OF YOUR OWN CHOOSING.

AFFIDAVIT OF APPLICANT

On this ______ day of ______, 20____, I, the above named Applicant, have completed, or have read, or have had read to me, the above questionnaire, and state under oath that each statement made herein is true. I hereby request a determination of indigency. I have been advised by the above named Court of my right to representation by counsel in the trial of the charge pending against me. I certify that I am without means to employ counsel of my own choosing and I hereby request the Court to appoint counsel for me.

Applicant

SUBSCRIBED AND SWORN TO before me on _____, 2010

Notary Public in and for The State of Texas

ORDER OF THE COURT

It is hereby Ordered that the above application is hereby APPROVED/DENIED.

Signed this the _____ day of _____, 2010.

Presiding Judge

Appointed Attorney: