

Cause No: _____

EXHIBIT D

THE STATE OF TEXAS

§

IN THE DISTRICT COURT

VS

§

OF

§

COMAL COUNTY, TEXAS

APPLICATION OF INDIGENCE AND REPRESENTATION BY A LAWYER

"I, the undersigned Defendant, do upon oath, make the following statements. I am charged with a felony offense which is punishable by jail incarceration."

SPANISH SPEAKING ONLY? YES: _____ NO: _____ CHARGE: _____

Date of Birth: _____ S.S.N. _____ Driver's License Number: _____

Marital Status: Single / Married / Divorced / Widowed Number of Actual Dependents: _____

How much money do you make: \$ _____ per week / month / year? Spouse's income \$ _____ per week / month / year?

List of all sources of income available to you, including AFDC/TANF, Food Stamps, Child Support, S.S.I., or any other income:

Amount: \$ _____ Source: _____ Amount: \$ _____ Source: _____

Your address: _____ Number in household: Adults _____ Children _____

Who pays for food, gasoline, clothing or other needs? _____

Do you own an automobile or other means of transportation? YES/NO Make/Model/Year: _____ Value: _____

Do you own other personal property? (Furniture, Jewelry, etc.): _____

Do you have any cash available at home or at the jail or in the bank? YES/NO Amount: \$ _____

Does anyone owe you money? YES/NO Who? _____ Amount \$ _____

Please list all debts that you have: (Rent, Mortgage, Car payment(s), Loan(s), etc.)

Lien holder, Landlord: _____ Amount of monthly payment \$ _____

Car Lien holder: _____ Amount of monthly payment \$ _____

Other loan(s) or debt(s): Credit Card, etc): _____ Amount of monthly payment \$ _____

_____ Amount of monthly payment \$ _____

I AM / AM NOT free on bail. Amount of bail: \$ _____ If free on bail, who posted the money? _____

Amount of money posted: \$ _____ List amount of money it cost YOU to get out of jail \$ _____ Date paid _____

I have attempted to hire the following attorneys: _____

"I have been advised by the District Court of my right to representation by a lawyer in the trial of the charge pending against me. I certify that I am without financial resources or means to hire a lawyer. "

"I further understand that I may be ordered to pay all or part of my lawyer's fees, and that my representation by a lawyer can be reconsidered if there is a material change in my financial circumstances. I further understand that I may be ordered to repay Comal County all or part of the cost of my lawyer if I am convicted of the charge as costs of court or as a term of probation. However, I understand that the amount that I will be charged will not be based on whether I choose Option 1, 2 or 3 described below as the way for arranging for a lawyer to represent me."

I understand that I have three options or choices in arranging for a lawyer represent me:

1. **FIRST OPTION:** I understand that I can choose a lawyer from among those lawyers who have been approved by the District Court to provide representation. And I know now the name of a lawyer who I would like to represent me. Further, I understand that I can list up to three names of lawyers that I would like to represent me. In order of preference, if available, the lawyer that I would like to represent me is as follows: (a) _____; (b) _____; (c) _____.
2. **SECOND OPTION:** I understand that I can choose a lawyer to represent me in my case from among lawyers who have been approved by the District Court to provide representation, but I am not ready at this time to select a lawyer. I understand that I have until ____ a.m./p.m. on _____ (month) _____ (day), _____ (year) and that if I do not choose a lawyer by this date and time, the District Court will appoint a lawyer for me. I have received a "Selection of a Lawyer" form on which I must list my lawyer preference(s) by the deadline shown in the preceding sentence.
FOR DEFENDANTS IN THE COMAL COUNTY JAIL: I further understand that if I am released on bond from the Comal County Jail prior to the expiration of the deadline listed above, I must make my selection of counsel before leaving the jail and therefore the deadline for my choosing a lawyer will not apply. I further understand that in this circumstance the District Court will select a lawyer for me and this lawyer will be appointed to represent me.
3. **THIRD OPTION:** I hereby request the District Court to select my lawyer and appoint this lawyer to represent me.

DEFENDANT REQUIRED TO CIRCLE AND INITIAL OPTION SELECTED

I DECLARE UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT

Defendant's Signature: _____ Date of Birth: _____

Address: _____ Phone Number: _____ Today's Date _____

SWORN AND SUBSCRIBED TO BEFORE ME, THIS THE _____ DAY OF _____, 20_____, personally appeared the above name Defendant who subscribed the foregoing instrument and after having been duly sworn by me, state on his/her oath that the foregoing statements are true and correct.

_____ NOTARY/DEPUTY CLERK

ORDER APPOINTING COUNSEL

Based on the foregoing Application of Indigency, the following attorney is hereby appointed to represent the defendant in this cause until charges are dismissed, the defendant is acquitted, appeals are exhausted, or the attorney is relieved of this duty or replaced by other counsel by leave of Court, pursuant to Article 26.04, Code of Criminal Procedure.

Name of Attorney: _____ Phone Number: _____

Address: _____

Judge Presiding