

STATE OF TEXAS  
COUNTY OF GARZA

"On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I have been advised by a Magistrate of Garza County, Texas, of my right to representation by counsel in the trial of the charge pending against me. I am without means to employ counsel of my own choosing and I hereby request that the court appoint counsel for me. I am charged with a Class "\_\_\_\_" Misdemeanor/ \_\_\_\_\_ degree, Felony.

Charge: \_\_\_\_\_

Cause #: \_\_\_\_\_

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

Bond Made? Yes \_\_\_\_\_ No \_\_\_\_\_

**QUESTIONNAIRE CONCERNING FINANCIAL RESOURCES**

A person who requests a determination of indigence and appointment of counsel shall complete under oath the following questionnaire concerning his/her financial resources and, if requested, must respond under oath to examination regarding his financial resources by the judge responsible for determining whether the person is indigent.

Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Maiden Name: \_\_\_\_\_ Alias/Nicknames: \_\_\_\_\_

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Driver's License: \_\_\_\_\_

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

(physical address)

(City, County, State, Zip)

Telephone ( ) \_\_\_\_\_ - \_\_\_\_\_ Mobile/Cell Number ( ) \_\_\_\_\_ - \_\_\_\_\_ Fax # \_\_\_\_\_ - \_\_\_\_\_

How long at current address? \_\_\_\_\_ Do You: OWN \_\_\_\_\_ Rent \_\_\_\_\_ N/A \_\_\_\_\_

Live with: \_\_\_\_\_ Relationship: \_\_\_\_\_

Previous address: \_\_\_\_\_

(Physical Address)

(City, County, State, zip)

Marital Status: \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced

Spouse's Name: \_\_\_\_\_ Year of Marriage: \_\_\_\_\_

Names and ages of dependants living with you: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your Citizenship: \_\_\_\_\_

Current Occupation: \_\_\_\_\_ How Long: \_\_\_\_\_

Employer: \_\_\_\_\_ Telephone ( ) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_  
(Physical Address) (City, County, State, Zip)

Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Telephone ( ) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_  
(Physical Address) (City, County, State, Zip)

Your current health condition: \_\_\_\_\_

List Sources of Income and Average Annual Amounts:

- A. Take-Home wages and/or Salary: \$ \_\_\_\_\_
- B. Net Self-Employment Income: \$ \_\_\_\_\_
- C. Government Program Income: \$ \_\_\_\_\_
- D. Unemployment/Disability/Retirement Income: \$ \_\_\_\_\_
- E. Alimony/Child Support Income: \$ \_\_\_\_\_
- F. Annuities/Dividends/Interest Income: \$ \_\_\_\_\_
- G. Rental/Royalty Income: \$ \_\_\_\_\_
- H. Trust/Estate Income: \$ \_\_\_\_\_
- I. Available Spouse Income: \$ \_\_\_\_\_

Are you or your dependents currently receiving? \_\_\_\_\_ Food Stamps \_\_\_\_\_ Medicaid  
\_\_\_\_\_ Temporary Assistance for Needy Families \_\_\_\_\_ Public Housing  
\_\_\_\_\_ Supplemental Social Security Income

List all assets/ property owned and value:

- A. Real Estate: \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_
- B. Automobiles: \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_
- C. Cash/Bank Accounts: \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_
- D. Stock/Bonds: \_\_\_\_\_ \$ \_\_\_\_\_

List your outstanding obligations and balances due:

- A. Mortgages: \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_
- B. Automobile: \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_
- C. Other Loans: \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

D. Credit Cards: \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 E. Child Support: \_\_\_\_\_ \$ \_\_\_\_\_

List your necessary monthly living expenses:

A. House Mortgage/ Rent: \_\_\_\_\_ \$ \_\_\_\_\_  
 B. Utilities: \_\_\_\_\_ \$ \_\_\_\_\_  
 C. Food: \_\_\_\_\_ \$ \_\_\_\_\_  
 D. Medical: \_\_\_\_\_ \$ \_\_\_\_\_  
 E. Child Care: \_\_\_\_\_ \$ \_\_\_\_\_  
 F. Transportation: \_\_\_\_\_ \$ \_\_\_\_\_

STATE OF TEXAS  
 COUNTY OF GARZA

"I swear/affirm that the foregoing answers concerning my financial resources are true and correct."

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

Subscribed and sworn before me, \_\_\_\_\_, on this \_\_\_\_\_ day  
 of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
 Magistrate/Notary Public, State of Texas