

DEFENDANT'S FINANCIAL AFFIDAVIT
ALL BLANKS MUST HAVE ANSWERS

CAUSE NO. (S) _____ OFFENSE (S) _____

My name is: _____, I am fully competent to make this affidavit.

1. Full legal name: _____

2. Social Security number: _____ TDL# OR ID# _____

3. Phone Number: _____ Other names used: _____

4. Age: _____ Date of Birth: _____ Place of Birth: _____

5. Name of Significant Other: _____

6. Names, ages, and relationships of people who I financially support:

7. Current Address: _____

8. How long at this address: _____ How long at last address: _____

9. House or Apartment: _____ Renting/Buying: _____

10. Job or Occupation: _____ How long: _____

11. Employer's Name/Address: _____

12. Work Phone Number: _____ Salary/Hourly Wage: _____

13. Supervisor's Name: _____

14. If unemployed, last job: _____

15. My monthly paycheck/cash (income): \$ _____

16. Significant Other's Income: \$ _____

17. List any and all other sources of income other than above:
(Example: Child Support, S.S.I., Unemployment, Food Stamps, Etc.) \$ _____

18. Total cash on hand: Checking & Savings, Cash \$ _____

19. ADD NUMBERS 15—18 TOTAL INCOME \$ _____

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DEBTS & EXPENSES I PAY:

- 20. Monthly rent or house payment: \$ _____
- 21. Total monthly utilities: \$ _____
- 22. Total monthly vehicle payments: \$ _____
- 23. List all other monthly expenses:
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____
- _____ \$ _____

TOTAL MONTHLY DEBTS AND EXPENSES: \$ _____

I am currently (check one): _____ **IN JAIL** _____ **ON BOND**

TYPE OF BOND: ___ **CASH** ___ **PRE-TRIAL** ___ **PERSONAL** ___ **SURETY**(report to bondsman)

I ___ **Have** ___ **Have Not** attempted to hire an attorney in this case. The names of the attorney(s) I have contacted are: _____

“I hereby request that an attorney be appointed to represent me because I am too poor/indigent to hire an attorney.

I swear or affirm that the information and facts I have provided for the Court above are within my personal knowledge and are true and correct. I understand that if I intentionally or knowingly give false information either in this affidavit, or during any hearing on my financial status, that I may be prosecuted for aggravated perjury and if convicted, be sentenced to serve up to ten (10) years in the penitentiary.

I further acknowledge that by signing this request for Court Appointed Counsel, I hereby give my consent to and authorize Guadalupe County, Texas to check and obtain my credit and employment history.”

I also acknowledge and understand that I may be responsible for payment of the Court appointed attorney fees.

Defendant

Sworn to and subscribed before me on this the _____ day of _____, 20,

by _____

TERESA KIEL, COUNTY CLERK, Guadalupe County.

By: _____
Deputy