

<b>Defendant Name:</b>							
<b>Date:</b>		<b>SPN:</b>		<b>DOB:</b>		<b>Age:</b>	
<b>Court:</b>		<b>Cause:</b>		<b>Offense:</b>			
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<b>Special Needs:</b>							

### **AFFIDAVIT OF FINANCIAL CONDITION**

This affidavit will be used to assess alternatives to imposing secured money bail and determine eligibility for appointed counsel.

<b>Defendant Status:</b>	PLEASE SELECT			
<b>Type of Bond (check one, if any):</b>	<input type="checkbox"/> CASH	<input type="checkbox"/> PERSONAL	<input type="checkbox"/> PRETRIAL	<input type="checkbox"/> SURETY (BONDSMAN)

<b>Number of people in family or household that rely on you for financial support (not including yourself):</b>			
<b>Name</b>	<b>Age</b>	<b>Relationship</b>	
		PLEASE SELECT	
		PLEASE SELECT	
		PLEASE SELECT	
		PLEASE SELECT	

<b>I live at (address):</b>			
<b>How long at this address:</b>		<b>How long at last address:</b>	
<b>Address type (house, apartment, etc.):</b>	PLEASE SELECT	<b>Own, Rent, Other:</b>	PLEASE SELECT

<b>My employment status is:</b>	PLEASE SELECT		
<b>Employer's name:</b>			
<b>Employer's address:</b>			
<b>Employer's telephone number:</b>		<b>Supervisor's name:</b>	
<b>Job or occupation:</b>		<b>How long employed:</b>	
<b>If not employed, my last job was:</b>			

Monthly Income	
Your Salary	
Spouse's Salary / Other Household Income	
SSI/SSDI	
TANF	
Social Security Check	
Child Support	
Other Government Check	
Government Housing	
Other Income	
<b>TOTAL INCOME</b>	

Necessary Monthly Living Expenses	
Rent/Mortgage and Insurance	
Car Payment and Insurance	
Utilities	
Cell Phone	
Clothes/Food	
Day Care / Child Care	
Health Insurance	
Medical Expenses	
Credit Cards	
Court-Ordered Monies	
Child Support	
<b>TOTAL NECESSARY EXPENSES</b>	

Nonexempt Assets	
Cash on Hand	
Value of Stocks, Bonds, and Investments	
Amount in Savings Account	
Amount in Checking Account	
Value of Real Property (Land)	
<b>TOTAL ASSETS</b>	

<b>FOR MISDEMEANOR ONLY OR FOR MISDEMEANOR AND FELONY (BOTH):</b> What is the most money you could reasonably pay to get out of jail within 24 hours after your arrest, including any contributions from family and friends?	
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*I have been advised of my right to representation by counsel in the trial of the charge pending against me. If I am asking the court to appoint counsel for me, then I certify that I am without means to employ counsel of my own choosing. I swear under penalty of perjury that the above information is true, correct, and complete. The information listed above is accurate and I will immediately notify the court of any changes in my financial situation. I understand that all information in this affidavit is subject to verification and that falsifying this information is a criminal offense.*

<b>I am asking the court to appoint counsel for me.</b>	PLEASE SELECT
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\_\_\_\_\_  
Date

\_\_\_\_\_  
Defendant Signature

Sworn to and subscribed before me on the date shown.

\_\_\_\_\_  
Deputy District Clerk / Peace Officer / Pretrial Services Agent

<b>Defendant refused to provide data</b>	PLEASE SELECT
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