DEFENDANT'S FINANCIAL AFFIDAVIT
AND
REQUEST FOR COURT APPOINTED ATTORNEY

Case number _____ Offense _____ Degree F: 1__ 2__ 3__ SJ__ Misd: A__ B__ C__

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

Convicted felon: Yes or No Are you on parole? Yes or No Are you on probation? Yes or No

Do you have a hold on you? Yes or No If yes, what county and charge? _____

1. Social Security Number _____ Texas Driver's License_____
2. Other names you have used_____
3. Age: _____ Date of Birth: _____
4. Number of person's who depend upon you for support: _____
   Age of dependants: _____
5. Spouse's name: _____ How many years married? _____
6. Residential address: _____ Mailing address: _____
7. How long have you lived at this address? _____ How long at last address? _____
8. House, apartment, condominium, trailer, other: _____ Renting or buying _____
9. Employed/unemployed _____ What is the highest level of school completed? _____
10. Job or occupation_____
11. Are you physically able to work?_____ If no, do you receive disability? _____
    How much?_____ List your job skills: _____
12. Employer's name: _____Supervisor Name:_____
13. Employer's address:_____
14. Work telephone number: _____Personal Number:_____
15. If unemployed, my last job was_____ Where?_____
16. My average TOTAL monthly income from all sources $_____ Spouse $_____
17. List any and all other sources of income not considered in # 16 $_____
18. List all government support you receive: _____
19. Total of cash on hand, checking accounts, savings accounts, certificates of deposit, stocks, mutual funds, etc. $ _____
    _____
20. Value of real estate owned $_____
21. Value of automobiles $ _____Year: _____ Make: _____
22. Monthly payments: rent $_____utilities $_____ vehicle $_____
23. List all other monthly expenses and amounts: _____
    _____

TOTAL MONTHLY EXPENSES $_____

23. I am currently ( ) in jail ( ) on bond Who paid bond: _____ How much? _____
24. Type of bond ( ) Cash ( ) Personal ( ) Surety
25. I ( ) have ( ) have not attempted to hire an attorney in this case. The names of the attorneys I have contacted are _____
    _____

"I am indigent, cannot hire an attorney and request that one be appointed for me. Further, 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."

_____
Defendant

Sworn and subscribed before me this_____ day of _____, 20_____

_____
Magistrate

( ) Approved **Date Received_____**

( ) Not Approved **Date Attorney Appt'd_____**

( ) Appear for Court and use Counsel for Docket Call **Attorney_____**

PLEASE BE ADVISED THAT IF THIS AFFIDAVIT IS NOT FULLY AND LEGIBLY COMPLETED, YOUR REQUEST WILL BE DENIED. PLEASE ASK THE JAILER FOR ASSISTANCE.

Judge's Signature_____