

APPLICATION FOR COURT APPOINTED ATTORNEY

NAME: CAUSE NO: DATE: DOB: PIN:

ALL INFORMATION MUST BE CURRENT, ACCURATE, AND TRUE. INTENTIONALLY OR KNOWINGLY GIVING FALSE INFORMATION MAY RESULT IN YOUR PROSECUTION FOR THE OFFENSE OF AGGRAVATED PERJURY, A FELONY. THE PUNISHMENT FOR AGGRAVATED PERJURY INCLUDES IMPRISONMENT NOT TO EXCEED TEN (10) YEARS AND A FINE NOT TO EXCEED TEN THOUSAND DOLLARS (\$10,000).

FAMILY STATUS: I am MARRIED / NOT MARRIED (circle one). I have dependant family members who live in my household and who rely upon me for their support. Their ages are:

INCOME: My monthly household income from all sources is \$, received in the following amounts from the following sources:

- 1. Salary: 2. Spouses Salary: 3. Child Support: 4. Unemployment: 5. Social Security: 6. Disability: 7. Workman's Comp: 8. Other Gov't. check: 9. Pension: 10. Interest: 11. Other income:

PROPERTY/ASSETS: I own the following property with the values (minus lien indebtedness) listed below:

- 1. Home: 2. Cars: 3. Boats: 4. Other vehicles: 5. Stocks / Bonds: 6. Collections: 7. Bank Accounts: 8. Savings Accounts: 9. Cash: 10. Other Real Property: 11. Guns /livestock: 12. All other assets, excluding household furniture:

I am able to pay AND HEREBY AGREE TO PAY \$ per month to help offset the cost of providing a court appointed attorney to me until I have paid the amount of \$350.00.

On this day of, 20, I have been advised by the Court 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 the court to appoint counsel for me. By signing my name below, I swear, that all of the above information about my financial condition is current, accurate, and true. By signing below, I understand that a court official can verify any of the information for accuracy as required to determine my eligibility.

DEFENDANT'S SIGNATURE

SUBSCRIBED and SWORN to before me, the undersigned authority, this day of, 20.

NOTARY PUBLIC/PERSON AUTHORIZED TO ADMINISTER OATHS

For use by Office of Indigent Defense only: DEFENDANT MEETS ELIGIBILITY REQUIREMENTS YES NO UNDETERMINED

APPOINTED ATTORNEY'S NAME:

Revised: 10/3/2011