

JUVENILE RESPONDENT'S FINANCIAL AFFIDAVIT (Parent or Guardian)

Case Number : _____ Offense: _____ Youth : _____

My name is _____, parent or guardian of _____.

I am fully competent to make this affidavit. I certify that I am financially unable to employ counsel and I hereby request the Court to appoint counsel. I am providing the following information as part of my application for a court appointed attorney. I fully understand that every question in this form must be answered and that failure to do so could result in the application for counsel not being considered.

1. Full legal name: _____ Home Telephone #: _____
2. Address: _____ How long at this address? _____
(house number, street, apt #, City, State)
3. Social Security Number: _____ TDL # _____
4. Other names I have used: _____
5. Age: _____ Date of Birth : _____ Place of Birth : _____
6. Relationship of those persons who live with me and who are dependent upon me for support:
 Spouse: _____ Age _____ Relationship _____ Age _____
 Relationship _____ Age _____ Relationship _____ Age _____
 Relationship _____ Age _____ Relationship _____ Age _____
7. Number of years married to spouse listed above: _____
8. I live in : House, apartment, condominium: _____ Renting or Buying : _____
9. Job or occupation: _____ How long ? _____
10. Employer's Name : _____
11. Employer's Address _____ Work Phone # _____
12. Supervisor's Name: _____
13. If unemployed, my last job was: _____ Date employment ended: _____

INCOME

14. My average TOTAL monthly income \$ _____.
15. Average TOTAL income of spouse \$ _____.
16. List all other sources of income received by you or your spouse not considered in questions 14 and 15
(Please include Food Stamps , TANF, Unemployment, Housing voucher, if applicable)
 Amount \$ _____ from _____
 Amount \$ _____ from _____
 Amount \$ _____ from _____
17. TOTAL INCOME – all sources \$ _____.

18. Total of cash on hand, checking accounts, savings accounts, certificates of deposit, stocks, mutual funds, life insurance policies, etc. \$ _____.
19. Value of real estate owned- less amount owed (other than family residence) \$ _____.
20. Value of automobiles -less amount owed \$ _____.

TOTAL VALUE of 18 – 20 \$ _____.

EXPENSES

21. Monthly rent or house payment \$ _____
22. Total monthly utilities \$ _____
23. Total monthly vehicle payments \$ _____
24. List all other monthly expenses . . .(Total of a through d below \$ _____
- a. Food \$ _____
 - b. Medical \$ _____
 - c. Monthly credit payments \$ _____
 - d. Other (itemize)
 - 1) _____ \$ _____
 - 2) _____ \$ _____
 - 3) _____ \$ _____
 - 4) _____ \$ _____
25. TOTAL MONTHLY DEBTS AND EXPENSES . . TOTAL VALUE of 21-24. \$ _____

26. My child is currently (check one) in Detention Pending Court

I have have not attempted to hire an attorney in this case. The names of the attorneys I have contacted are _____

“ 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 PERJURY.”

Parent or guardian of JUVENILE RESPONDENT

Sworn to and subscribed before me this _____ day of _____, A.D. 20 _____

NOTARY PUBLIC OR DISTRICT CLERK OR COUNTY CLERK