

CAUSE NO. _____

PARKER COUNTY, TEXAS

**AFFIDAVIT OF INDIGENCY AND
APPLICATION FOR COURT APPOINTED LAWYER**

Notice: All information must be completed by the applicant and must be current, accurate and true. Intentionally or knowingly giving false information may result in your prosecution for the felony offense of aggravated perjury. The punishment for aggravated perjury includes imprisonment not to exceed ten (10) years and a fine not to exceed ten thousand dollars (\$10,000).

Applicant's Personal Information

Full Name	
Phone Number	
Street Address	
City, State, Zip Code	
Social Security Number (last three numbers only)	
Driver License Number (last three numbers only)	
Date of Birth	
Name of Spouse	

Dependents

Name(s) (list below)	Age	Relationship	Lives with you?
			Y N
			Y N
			Y N
			Y N
			Y N
			Y N

Applicant's Employment Information

Employer	
Phone Number	
Supervisor's Name	
Street Address	
City, State, Zip Code	
Hours Worked	_____ per week _____ per month
Pay Rate	\$ _____ per hour

Spouse's Employment Information

Employer	
Phone Number	
Supervisor's Name	
Street Address	
City, State, Zip Code	
Hours Worked	_____ per week _____ per month
Pay Rate	\$ _____ per hour

If unemployed, list the following:

Length of time unemployed	
Name of previous employer	
Street Address	
City, State, Zip Code	
Why are you currently unemployed?	

Public Assistance

Are you currently receiving: (check all that apply)
<input type="checkbox"/> Food Stamps <input type="checkbox"/> Medicaid <input type="checkbox"/> Public housing <input type="checkbox"/> Supplemental Security Income (SSI)

Assets

Description	Value
Residence: _____ Own _____ Rent	\$
Real Property Owned: (Describe) _____	\$
_____	\$
Automobiles, Motorcycles, Motor Homes, Boats, Campers, Water Craft, Trailers, Tractors (Describe)	
Make _____ Model _____ Year _____	\$
Make _____ Model _____ Year _____	\$
Make _____ Model _____ Year _____	\$
Make _____ Model _____ Year _____	\$
Stocks, Bonds, Investments (Describe) _____	\$
_____	\$
Personal Property (Includes jewelry, household furniture, appliances, tools, clothing, etc.)	\$
Bank Accounts (Includes checking, savings, money market, certificates of deposit)	
Bank Name _____ Type of Account _____	\$
Bank Name _____ Type of Account _____	\$
Bank Name _____ Type of Account _____	\$
Other Assets Not Listed Above (Describe) _____	\$
_____	\$
Total Assets	\$

Financial Information

Expenses (Monthly)

Income (Monthly)

Dollar Amount

Dollar Amount

	Dollar Amount		Dollar Amount
Rent or Mortgage Payment		Applicant's Take Home Pay	
Car Payment(s)		Spouse's Take Home Pay	
Insurance (Life, Health, Auto, Homeowners, etc.)		Investment Income: (Interest and Dividends)	
Child Care		Rental Income	
Child Support		Pension Income	
Water		Retirement Income	
Gas		Unemployment Income	
Telephone		Social Security Benefits	
Electricity		Child Support	
Food		Social Security Disability	
Clothing		Medicaid	
Medical		Food Stamps	
Cable TV or Satellite TV		Cash Gifts	
Mobile Phone		Farming Income	
Miscellaneous		Lease Income	
Loan Payments: (list type of loan & payment amount, excluding mortgage) 1. _____ 2. _____ 3. _____		Other Income (such as housing, food, transportation, and gifts)	
Credit Card Debt: (list name of card, current balance & payment amount) 1. _____ Balance:\$ _____ 2. _____ Balance:\$ _____ 3. _____ Balance:\$ _____ 4. _____ Balance:\$ _____ 5. _____ Balance:\$ _____			
Other Monthly Expenses: (Describe and list payment amount) 1. _____ 2. _____ 3. _____			
Total Monthly Expenses		Total Monthly Income	

I have attempted to hire a lawyer. The names of lawyers I contacted are as follows:

1. _____
2. _____

I swear that I fully and completely disclosed all information in response to the foregoing inquiries and I have not withheld any such information. I further swear the information provided is current, accurate and true. If the court finds I am indigent, I request the appointment of a lawyer to represent me.

Applicant's Signature

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

Notary Public
State of Texas

Name: _____

My Commission Expires _____