

**APPLICATION FOR APPOINTED COUNSEL
AND
AFFIDAVIT OF FINANCIAL INABILITY TO EMPLOY COUNSEL**

HOW TO APPLY FOR COURT APPOINTED COUNSEL
PLEASE USE BLACK OR BLUE INK

In order for you to *get* a *COURT APPOINTED ATTORNEY*, you MUST do the following things. Failure to follow these directions EXACTLY means that you may NOT get an appointed attorney.

- Step 1: Fill out completely and truthfully the attached APPLICATION FOR APPOINTED COUNSEL AND AFFIDAVIT OF FINANCIAL INABILITY TO EMPLOY COUNSEL.
- Step 2: If out on bond, contact in person at least three (3) attorneys to see if they will take your case. If not out on bond, then contact the three (3) attorneys by telephone or through friends and relatives.
- Step 3: If after contacting the three (3) ATTORNEYS (step 2) and you still have not been able to hire an attorney on your own, you need to bring your APPLICATION FOR APPOINTED COUNSEL AND AFFIDAVIT FOR FINANCIAL INABILITY TO EMPLOY COUNSEL to the Court Clerk's Office.
- Step 4: Sign the APPLICATION before a Notary Public, Court Clerk, or Judge. A fee of FORTY DOLLARS(\$40.00) WILL BE REQUIRED from you before your application is processed. THIS FEE IS NOT REFUNDABLE. THE FEE DOES NOT PAY FOR YOUR ATTORNEY. IT IS A PROCESSING FEE.

Your application will be delivered to a Judge for review. If the Judge determines that you cannot afford to hire an attorney, an attorney will be appointed to represent you.

THE JUDGES REQUIRE THAT ALL BLANKS ON FORM BE COMPLETED

THE APPLICATION FOR APPOINTED COUNSEL AND AFFIDAVIT OF FINANCIAL INABILITY TO EMPLOY COUNSEL IS SIGNED BY YOU UNDER OATH AND UNDER THE PENALTY OF PERJURY. THIS MEANS THAT YOU SWEAR THAT THE INFORMATION YOU PROVIDED IS TRUE, IF THIS INFORMATION IS NOT TRUE, THEN YOU ARE SUBJECT TO CRIMINAL PENALTIES. YOU MUST INFORM THE OKLAHOMA INDIGENT DEFENSE SYSTEM OF ANY CHANGES IN YOUR PERSONAL FINANCES THAT MAY CHANGE THE INFORMATION YOU PROVIDED IN THE APPLICATION FOR APPOINTED COUNSEL AND AFFIDAVIT OF FINANCIAL INABILITY TO EMPLOY COUNSEL.

NOTICE

A COPY OF THIS APPLICATION AND AFFIDAVIT SHALL BE SENT TO THE PROSECUTION ATTORNEY, FOR REVIEW AND, UPON REQUEST, THE COURT SHALL HOLD A HEARING TO DETERMINE YOUR ELIGIBILITY FOR LEGAL SERVICES TO BE FURNISHED TO YOU AT PUBLIC EXPENSE.

IN THE DISTRICT COURT OF CHOCTAW
NATION OF OKLAHOMA

_____, PLANTIFF

vs..

CASE NUMBER _____

_____, DEFENDANT

APPLICATION FOR APPOINTED COUNSEL
AND
AFFIDAVIT OF FINANCIAL INABILITY TO EMPLOY COUNSEL

I swear and affirm that I am the party in the above entitled action. I want an attorney to represent me in this case. I am financially unable to obtain the services of an attorney without causing substantial hardship to myself or to my family. The following information is true and is given and intended to be relied upon by the court and other persons or agencies to determine my eligibility for legal services to be furnished to me at public expense.

PLEASE FILL IN ALL SPACES BELOW AND SIGN YOUR NAME UNDER OATH IN FRONT OF THE JUDGE, A NOTARY OR THE COURT CLERK.

1. GENERAL INFORMATION

DATE _____

Name _____ Phone # _____

Address _____ Social Security # _____

City _____ State _____ Zip _____

Age _____ Date of Birth _____ Single () Married () Separated ()

Spouse's Name _____

Address _____ Phone # _____

How many people are in your household? _____ Names and ages _____

Are you claimed as a dependent by a parent or guardian? Yes () No ()

2. FAMILY INCOME

Your monthly () or weekly () take home pay \$ _____

Your employer or other source of income (including any government agency such as Social Security, Disability or Unemployment) _____ Employers Phone # _____

Spouse's take home pay \$ _____ Spouse's source of income _____

Is any other member of your household employed? Yes () NO () Who? _____
Where? _____

Other source of income or benefits (including interest, dividend, etc.) _____

Total family income for preceding month was \$ _____

3. FAMILY ASSETS (What you own less what you owe on it)

MONEY In jail \$ _____ At home \$ _____ Checking \$ _____ Savings \$ _____

Safe Deposit Box \$ _____ Other \$ _____

VALUE OF OTHER PROPERTY

Home or other real estate \$ _____ Jewelry \$ _____

Automobile(s) Make _____ \$ _____

Motorcycle(s) Make _____ \$ _____

Tools/Equipment _____ \$ _____

Notes, mortgages, trust deeds \$ _____

Any debts owed to defendant \$ _____ Other _____ \$ _____

Are you a party to any lawsuits (probate, worker's comp, personal injury, etc.) where judgment may be expected?

Yes () No () Name of attorney _____

4. EXPENSES AND DEBTS

Rent/house payment \$ _____ Clothing \$ _____ Food \$ _____
Doctor/medicine \$ _____ Utilities \$ _____ Other \$ _____
Car payment \$ _____ Insurance \$ _____ Gas \$ _____
Total monthly living expenses \$ _____
Mortgage holder/landlord's name _____
Major debt/loans (to whom and amount owed) _____

List the persons who are dependent on you for support. State you relationship to each person and how much you contribute monthly to their support _____

5. LAST EMPLOYMENT

When did you last work? _____ Who was your last employer? _____
Salary \$ _____ How long did you work there? _____ Why did you leave? _____

The following people can verify to a large extent my above mentioned financial situation (give name address and phone number)

- 1. _____
- 2. _____
- 3. _____

7. CHARGE AND BOND

Charges: Felony () Misdemeanor () Juvenile () Arresting Agency _____
City _____ County _____ State _____

Has bond been posted? Yes () No () Did you use a bondsman? Yes () No ()

Who paid the Bondsman? _____

Amount of Bond \$ _____ Amount paid to bonding company \$ _____

If you did not use a bondsman what bond did you post? Cash () \$ _____ PR ()

List any other defendant(s) charged with you _____

8. OTHER INFORMATION

A. Have you transferred or sold any assets since charges were filed against you? Yes () No () If yes, describe the buyer and the amount received _____

B. Have you retained an attorney in this case or in any other pending criminal case? Yes () No () If so, state the case number, court, attorney and amount paid to the attorney for services _____

C. Do you have any friends or relatives who are able and willing to assist you in hiring an attorney and paying for transcripts? Yes () No () If so, have those persons been asked to help? Yes () No ()

D. If any friend or relative has given previous financial assistance in the case, but is no long able or willing to do so, an affidavit to that effect from that person should be attached. Is that affidavit attached? Yes () No ()

9. NAMES OF THREE ATTORNEYS YOU CONTACTED

1. Name _____

When did you contact this attorney? _____

How did you contact this attorney? _____

Can you afford this attorney? Yes () No ()

2. Name _____

When did you contact this attorney? _____

How did you contact this attorney? _____

Can you afford this attorney? Yes () No ()

3. Name _____

When did you contact this attorney? _____

How did you contact this attorney? _____

Can you afford this attorney? Yes () No ()

I declare under penalty of perjury that the information I have provided is true and correct. I understand that I may be prosecuted for providing false information in this application and affidavit. I understand that I must inform the Choctaw Nation District Court of any change in my financial situation that may change the information I have provided. I further declare that I have contacted three licensed attorneys to represent me.

Dated this _____ day of _____, 20_____.

Defendant
or

Legal guardian

Subscribed and sworn to before me on the _____ day of _____, 20_____.
My commission expires: _____

Susan Lozano, Choctaw Nation District Court Clerk

Notary

By _____
Deputy

<p>APPLICATION FOR COURT APPOINTED COUNSEL IS:</p> <p>() APPROVED () DENIED</p> <p>THE COURT HEREBY APPOINTS</p> <p>_____ ATTORNEY AT LAW</p> <p>TO REPRESENT THE DEFENDANT</p> <p>BY: JUDGE _____</p>

NOTICE

A copy of this application and affidavit shall be sent to the prosecution attorney or office of attorney general, whichever is applicable, for review and, upon request the court shall hold a hearing to determine your eligibility for legal services to be furnished to you at public expense.

IMPORTANT NOTICE

The court shall order you to pay the costs of your legal representation in total, or in installments. The court shall set the amount and due date of each installment payment. The costs shall be paid to the Court Clerk. The costs shall be a debt against you until paid and shall subject you to debt collection procedures as provided by law. The costs shall be deducted from any state income tax refund due you until the total costs are paid.