

WARRANT OR CAUSE NO. _____ OFFENSE: _____

THE STATE OF TEXAS

§

IN THE DISTRICT COURT

VS.

§

33RD/424TH JUDICIAL DISTRICT

§

_____ COUNTY, TEXAS

Defendant

I do not wish to have an attorney appointed to me and I will retain my own attorney.

Signature: _____ Date: _____

AFFIDAVIT OF INDIGENCE FOR COURT APPOINTED ATTORNEY

Every question on this form must be answered. Failure to do so could result in the application not being considered. If you need assistance, notify the person in charge of taking the application. You must answer each question truthfully; failure to do so could subject you to additional criminal charges, to include but not limited to perjury.

1. LAST NAME _____ FIRST NAME _____ MIDDLE _____

2. ADDRESS _____

3. TELEPHONE NUMBER: _____ Email: _____

4. MARRIED ____ SINGLE ____ DIVORCED ____ SEPARATED ____ SOCIAL SECURITY NO. _____

5. NAME OF SIGNIFICANT OTHER _____

6. NUMBER OF CHILDREN UNDER 18 LIVING WITH YOU _____ AGES _____

7. ARE YOU PAYING? ____ RECEIVING? ____ CHILD SUPPORT? HOW MUCH? _____ PER MONTH

8. ARE YOU EMPLOYED? ____ IF YES, NAME OF EMPLOYER _____ # OF YRS _____

9. YOUR INCOME \$ _____ PER _____ SIGNIFICANT OTHER INCOME, IF AVAILABLE \$ _____ PER _____

10. ARE YOU RECEIVING INCOME OR PUBLIC ASSISTANCE BENEFITS FROM ANY OTHER SOURCE? YES ____ NO ____
IF YES, FROM WHO RECEIVED, FREQUENCY OF PAYMENT AND AMOUNTS:

11. IF UNEMPLOYED, NAME OF LAST EMPLOYER, DATE LAST EMPLOYED, AND AMOUNT PAID: _____

MONTHLY EXPENSES	
RENT/HOUSE PAYMENT	
CAR PAYMENT	
CREDIT CARDS	
LOAN PAYMENTS	
MEDICAL PAYMENTS	
CHILD CARE/ SUPPORT	
INSURANCE	
UTILITIES	
FOOD & CLOTHING	
IRS / OTHER	
TOTAL EXPENSES	
TOTAL INCOME (MONTHLY)	
DIFFERENCE	

ASSETS	
HOUSE VALUE	
CAR VALUE	
CASH	
BANK ACCOUNT(S)	
STOCKS	
JEWELRY	
FURNITURE	
OTHER	
TOTAL	

DEFENDANT SIGNATURE _____

DATE _____

SWORN TO AND SUBSCRIBED BEFORE ME on this the _____ day of _____, 2020.

Magistrate/Clerk/Notary