

WARRANT OR CAUSE NO. \_\_\_\_\_ OFFENSE: \_\_\_\_\_

THE STATE OF TEXAS

§ IN THE DISTRICT COURT

VS.

§ 33<sup>RD</sup>/424<sup>TH</sup> 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	
<b>TOTAL EXPENSES</b>	
<b>TOTAL INCOME (MONTHLY)</b>	
<b>DIFFERENCE</b>	

ASSETS	
HOUSE VALUE	
CAR VALUE	
CASH	
BANK ACCOUNT(S)	
STOCKS	
JEWELRY	
FURNITURE	
OTHER	
<b>TOTAL</b>	

DEFENDANT SIGNATURE

DATE

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

Granted: \_\_\_\_\_ Denied: \_\_\_\_\_

Attorney: \_\_\_\_\_

Magistrate/Clerk/Notary