



McLouth Municipal Court

IN THE MUNICIPAL COURT OF THE CITY OF McLOUTH, KANSAS

APPLICATION FOR APPOINTED DEFENSE SERVICES

City of McLOUTH VS. _____ Case No. _____

NOTICE TO APPLICANT:

General Information

The information on the attached Financial Affidavit is **not** confidential.

Any information contained on the attached affidavit may be verified by the judge or the City of McLouth. False entries may lead to criminal prosecution and conviction.

If you do not understand a specific question or need help, ask for assistance.

The judge may place you under oath and inquire further about any information provided on this form.

Eligibility for Defense Services

Appointed counsel and other defense services will only be provided to people who cannot afford to pay for these services themselves.

If the judge determines that you are able to pay a part of the costs of your defense, you will be found partially indigent and the court will order you to pay for a part of these costs.

If, after the date of the alleged offense, you transfer any of your property for less than it is worth, the City may sue to obtain repayment of the cost of your defense.

You must inform the court if there is a change in any of the financial information given on the affidavit.

Repayment to the City

K.S.A. 12-4509 provides that persons who are convicted of a crime may be required to reimburse the city for all or part of the attorney fees and expenses paid by the city.

The court shall take into account the financial resources and the nature of the burden that payment of such sum will impose. Any person who has been required to pay such sum and who is not willfully in default may petition the sentencing court to waive payment of any remaining balance or portion thereof.

I have read or have had read to me and understand the above notice. I hereby request that court-appointed counsel be provided to me and agree to attempt to repay the State for the costs of my defense if the court so orders.

Date

Signature of Defendant



McLouth Municipal Court

IN THE MUNICIPAL COURT OF THE CITY OF McLOUTH, KANSAS

FINANCIAL AFFIDAVIT

For Court-Appointed Attorney, Expert or Other Services

CASE NO. _____

FALSE STATEMENTS COULD RESULT IN ANOTHER CASE BEING FILED AGAINST YOU!!!

Name _____ Age _____ D.O.B. _____ Phone _____ S.S. # _____
Address _____ City _____ State _____ Zip Code _____
Spouse (if married – including common-law) _____

1. Are you Self-Employed Employed Unemployed
If self-employed, what line of work? _____
If employed, who do you work for? _____
If unemployed, for how long? _____

2. List the places you have worked in the last six months:
1. Name _____ Address _____
2. Name _____ Address _____
3. Name _____ Address _____

3. If employed, give an approximate **monthly** rate of pay \$ _____

4. Is your spouse Self-Employed Employed Unemployed
If self-employed, what line of work? _____
If employed, who does he/she work for? _____
If employed, give an approximate **monthly** rate of pay \$ _____
If unemployed, for how long? _____

5. Do you own a car, truck, or motorcycle? Yes No
If yes, give year, make and model: _____
Please give value \$ _____ Is it paid for? Yes No Amount owing \$ _____

6. Do you receive, or have you received, in the past six months, income from rental property, public assistance, support or other sources, including from a business? Yes No
If yes, give source and monthly income: Source: _____ Amount: \$ _____

7. Do you have any money or cash in savings, checking accounts or other funds? Yes No
If yes, list amount of money available to you \$ _____

8. Do you own a home, land, or other property? Yes No If yes, give value \$ _____

9. Can you afford to pay anything toward the cost of your defense at this time? Yes No
If yes, how much \$ _____

10. Do you currently have any other court cases in this court in which you already have counsel appointed?
 Yes No
If yes, give attorney's name _____

11. Are you a student? Yes No
 If yes, indicate name of college or school you attend _____
 Have you received financial aid? Yes No
 If yes, indicate type Student Loan - Amount: \$ _____ Scholarship or Grant – Amount: \$ _____
 Have you received financial assistance from any other source Yes No
 If yes, indicate source and amount: Source _____ Amount \$ _____

(Check Appropriate Box)

- SINGLE MARRIED LIVING WITH A ROOMMATE
 WIDOWED SEPARATED/DIVORCED

DEPENDANTS

TOTAL NUMBER _____

LIST NAMES, AGES AND RELATIONSHIP TO YOU

YOU MAY BE REQUIRED TO
 PROVIDE COPIES OF MOST RECENT
 YEAR'S FEDERAL AND STATE
 INCOME TAX RETURNS

MONTHLY BILLS

RENT/HOUSE PAYMENT \$ _____
 FOOD/CLOTHING \$ _____
 UTILITIES \$ _____
 ALIMONY \$ _____
 CHILD SUPPORT \$ _____
 INSTALLMENT PAYMENTS \$ _____
 OTHER PAYMENTS \$ _____

Office use only:
 Date verified: _____
 Verified by: _____

TOTAL PAYMENTS \$

I certify under the penalty of perjury that the foregoing is true and correct. By signing below, I authorize the CITY OF McLOUTH to verify my past and present employment earnings, records, bank accounts, stock holdings, and any other asset balances that are needed to process this affidavit with the municipal court. I further authorize the CITY OF McLOUTH to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references.

Executed this _____ day of _____, 20 _____

SIGNATURE _____

FOR JUDGES USE ONLY

- APPOINTMENT DENIED
 PUBLIC DEFENDER APPOINTED
 _____ ATTORNEY APPOINTED
 PARTIALLY INDIGENT, ABLE TO PAY \$ _____

DETERMINATION OF ELIGIBILITY –
 K.A.R. 105-4-1(b): “An eligible indigent defendant is a person whose combined household income and liquid assets equal less than the sum of the defendant’s reasonable and necessary living expenses plus the anticipated cost of private legal representation.”

JUDGE _____