

Income and Assets

Income: Net income (total salary and wages, minus deductions required by law, including court ordered child support payments):

\$ _____ per week \$ _____ bi weekly \$ _____ per month \$ _____ per year

Spouse's Earnings:

\$ _____ per week \$ _____ bi weekly \$ _____ per month \$ _____ per year

Other Benefits: Social Security \$ _____ Veteran's benefits \$ _____
Worker's Compensation \$ _____ Other \$ _____

Things I Own: Cash \$ _____ Savings Account \$ _____
Bank Accounts \$ _____ Stocks & Bonds \$ _____
Jewelry \$ _____ Certificates of Deposit \$ _____
Equity in Real Estate \$ _____ Equity in other Tangible Property \$ _____

Equity in Motor Vehicles:

Type: _____ Year _____ Make _____ \$ _____
Type: _____ Year _____ Make _____ \$ _____

I am _____ in jail _____ out on bond. Total Bond Amount _____

Who posted your Bond? Name _____
Address _____
Telephone _____

I receive AFDC: () Yes () No. I receive Supplemental Security Income (SSI): () Yes () No
State any other sources of income or additional assets not specifically requested above: _____

BY MY SIGNATURE BELOW, I SWEAR UNDER THE PENALTY OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND BASED UPON MY PERSONAL KNOWLEDGE, AND I REQUEST THAT THE CIRCUIT PUBLIC DEFENDER'S OFFICE REPRESENT ME, OR THE MINOR CHILD OR TAX-DEPENDANT PERSON I AM PARENT OR GUARDIAN OF, IN THE ABOVE STYLED CASE(S). FURTHER, I AGREE TO IMMEDIATELY REPORT ANY CHANGE IN MY FINANCIAL SITUATION TO THE CIRCUIT PUBLIC DEFENDER'S OFFICE.

If the Defendant/ Child is unable to read, write or understand English, the person assisting in the completion of this document must complete the "Assistance" section below.

This the _____ day of _____, 200____.
Name (Print) _____

Signature _____

The understated person provided assistance to the Defendant/ child with the completion of this form due to their inability to read and write.

Name: _____
Address _____
