

**APPLICATION FOR APPOINTED DEFENSE SERVICES**  
(to accompany Financial Affidavit)

STATE vs. \_\_\_\_\_ District Court Case No. \_\_\_\_\_

County Douglas \_\_\_\_\_

NOTICE TO APPLICANT:

A. *General Information*

1. The information on the attached affidavit is not confidential.
2. The judge or the Kansas Board of Indigents' Defense Services may verify any information contained on the attached affidavit.
3. False entries may lead to criminal prosecution and conviction.
4. If you do not understand a specific question or need help, ask for assistance.
5. The judge may place you under oath and inquire further about any information provided on this form.

B. *Eligibility for Defense Services*

1. You will receive an appointed attorney if you meet the standards for indigent status.
2. 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.
3. If, after the date of the alleged offense, you transfer any of your property for less than it is worth, the State may sue to obtain repayment of the cost of your defense.
4. You must inform the court if there is a change in any of the financial information given on the affidavit.

C. *Repayment to the State*

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

\_\_\_\_\_  
Defendant

**FINANCIAL AFFIDAVIT**

FOR CLERK'S USE ONLY

D. For Court-Appointed Attorney, Expert or Other Services  
(K.A.R. 105-4-3)

Judicial Dist. \_\_\_\_\_

County \_\_\_\_\_

CASE NO. \_\_\_\_\_

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

Name \_\_\_\_\_ Age \_\_\_\_\_ Birth Year \_\_\_\_\_ Phone \_\_\_\_\_ S.S.# \_\_\_\_\_

xxx-xx-\_\_\_\_\_

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? \_\_\_\_\_

Are you receiving unemployment benefits? Amount \$ \_\_\_\_\_ If, not, state reason \_\_\_\_\_

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? \_\_\_\_\_

Is he/she receiving unemployment benefits? Amount \$ \_\_\_\_\_ If, not, state reason \_\_\_\_\_

5. Do you own a car, truck, or motorcycle?  Yes  No

If yes, give year, make and model: 1. \_\_\_\_\_

2. \_\_\_\_\_

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, alimony, maintenance, or other sources, including from a business?  Yes  No

If yes, give source and monthly income: \_\_\_\_\_

7. Do you have 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 costs of your defense at this time?  Yes  No

If yes, how much \_\_\_\_\_

10. Do you currently have any other court cases pending in the District, in which you already have counsel appointed?

Yes  No

If yes, give attorney's name \_\_\_\_\_

(Check One)

SINGLE

MARRIED

WIDOWED

SEPARATED/DIVORCED

DEPENDANTS

TOTAL NUMBER \_\_\_\_\_

LIST NAMES, AGES AND

RELATIONSHIP TO YOU

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MONTHLY BILLS

RENT/HOUSE PAYMENT \_\_\_\_\_

FOOD/CLOTHING \_\_\_\_\_

UTILITIES \_\_\_\_\_

ALIMONY/MAINTENANCE \_\_\_\_\_

CHILD SUPPORT \_\_\_\_\_

INSTALLMENT PAYMENTS \_\_\_\_\_

OTHER PAYMENTS \_\_\_\_\_

**TOTAL PAYMENTS** \_\_\_\_\_

I certify under the penalty of perjury that the foregoing is true and correct. By signing below, I authorize the STATE OF KANSAS 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 district court. I further authorize the STATE OF KANSAS 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 of Applicant

**FOR JUDGE'S USE ONLY**

**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."

**TO BE COLLECTED PURSUANT TO K.S.A. 22-4529:**

**APPLICATION FEE OF \$100 effective 7/1/04**

Estimate of anticipated cost of private legal representation: \_\_\_\_\_ Applicable poverty guideline level:

\_\_\_\_\_

APPOINTMENT DENIED

PARTIALLY INDIGENT, ABLE TO PAY \$ \_\_\_\_\_

PUBLIC DEFENDER APPOINTED

\_\_\_\_\_ ATTORNEY APPOINTED

\_\_\_\_\_  
Judge

**2009 Poverty Guidelines** for the 48 Contiguous States and the District of Columbia

<b>Size of family unit</b>	<b>Poverty Guideline</b>
1.....	\$10,830
2.....	\$14,570
3.....	\$18,310
4.....	\$22,050
5.....	\$25,790
6.....	\$29,530
7.....	\$33,270
8.....	\$37,010

For family units with more than 8 members, add \$3,740 for each additional person. (The same increment applies to the smaller family sizes also, as can be seen in the figures above.)

Revised 06/05/09