

One Hamilton County Square
Noblesville, Indiana 46060

HAMILTON COUNTY SUPERIOR/CIRCUIT COURT
CAUSE NO. 29 _____
Please complete cause number for your case

AFFIDAVIT OF INDIGENCY AND REQUEST FOR APPOINTMENT OF COUNSEL

*Please state accurately and completely the following information.
Failure to answer every question may result in a DENIAL of your request*

Name _____ Age _____ Telephone No. (____) _____ - _____

Date of Birth ____/____/____ Social Security Number (last four numbers only) _____

Street Address _____

City _____ State _____ Zip _____

Currently in jail? Yes No

Occupation _____ **Current Employer** _____

Time with current employer _____ How often are you paid? _____

Pay BEFORE DEDUCTIONS \$ _____ Pay AFTER DEDUCTIONS \$ _____

If you are unemployed, how long have you been unemployed? _____

Why are you unemployed? _____

Are you (check one) single? married? divorced?

If married, what is your spouse's name? _____ Spouse's address, if different from yours:

Street Address _____

City _____ State _____ Zip _____

Spouse's employer _____ How often is your spouse paid _____

Spouse Pay BEFORE DEDUCTION \$ _____ Spouse Pay AFTER DEDUCTIONS \$ _____

If your spouse is unemployed, how long has he or she been unemployed? _____

Why is your spouse unemployed? _____

For BOTH you and your spouse, if married, please list all other sources of income:

| Type | Amount | How often received | Type | Amount | How often received |
|---------------|----------|--------------------|----------------|----------|--------------------|
| Unemployment | \$ _____ | _____ | Severance pay | \$ _____ | _____ |
| Disability | \$ _____ | _____ | Worker's comp. | \$ _____ | _____ |
| Child support | \$ _____ | _____ | Sick pay | \$ _____ | _____ |
| Pension | \$ _____ | _____ | Other | \$ _____ | _____ |

Is your health good? _____ If not, please explain? _____

If you own real estate, what is its value? _____ Amount owed on it \$ _____

Amount of monthly mortgage, if any \$ _____

Do you pay rent? _____ If yes, total monthly rent \$ _____ Amount that you pay \$ _____

Number of dependents _____ Ages _____ Do they live with you? _____

Do you pay child support? _____ If yes, how much do you pay each month \$ _____

Child support arrears you owe, if any \$ _____

Monthly household expenses that YOU pay (utilities, food, insurance, etc.): Monthly amount:

\$ _____

\$ _____

\$ _____

\$ _____

Please list any other adults that live with you by name, relationship, and monthly bring-home pay:

Please list all vehicles, such as car, trucks, or motorcycles, that you own or that are in your name:

Type of Vehicle _____ Value \$ _____ Amount owed on it, if any \$ _____

Type of Vehicle _____ Value \$ _____ Amount owed on it, if any \$ _____

Please list all other property that you own, such as boats, televisions, trailers, etc., worth \$500 or more:

Type of Property _____ Value \$ _____ Amount owed on it, if any \$ _____

Type of Property _____ Value \$ _____ Amount owed on it, if any \$ _____

List all debts that you owe over \$500: Amount owed

\$ _____

\$ _____

\$ _____

Please list all bank accounts in you name individually or jointly with somebody else:

Type of account _____ Amount in account: \$ _____

Type of account _____ Amount in account: \$ _____

If you posted a bond, what or who was the source of the money? _____

If you have another case pending under a different cause number, please list the attorney who is representing you on the other case: _____

If you are charged with a violation of probation, who was the attorney who represented you on this case when you were convicted or when you had a previous violation? _____

I understand that the Court may order me to reimburse the County in part or in whole for the public defender services. Under the pains and penalties for perjury, I hereby solemnly swear, or affirm, that the information above is true and correct to the best of my knowledge, information, and belief.

Date: _____ Your Signature: _____

It is your responsibility to submit the completed form in person, by mail, or by e-filing to the appropriate Court. The first five characters of your cause number indicates which Court has your case:

- 29C01-Circuit Court, 1 Hamilton County Square, Suite 337, Noblesville, IN 46060
- 29D01-Superior Court 1, 1 Hamilton County Square, Suite 345, Noblesville, IN 46060
- 29D02-Superior Court 2, 1 Hamilton County Square, Suite 384, Noblesville, IN 46060
- 29D03-Superior Court 3, 1 Hamilton County Square, Suite 311, Noblesville, IN 46060
- 29D04-Superior Court 4, 1 Hamilton County Square, Suite 292, Noblesville, IN 46060
- 29D05-Superior Court 5, 1 Hamilton County Square, Suite 297, Noblesville, IN 46060
- 29D06-Superior Court 6, 1 Hamilton County Square, Suite 215, Noblesville, IN 46060
- 29D07-Superior Court 7, 1 Hamilton County Square, Suite 239, Noblesville, IN 46060