

**SUPREME COURT OF APPEALS OF WEST VIRGINIA
AFFIDAVIT: ELIGIBILITY FOR APPOINTED OR PUBLIC DEFENDER COUNSEL**

NAME: _____
ADDRESS: _____

CONTACT PHONE: _____
DATE OF BIRTH: _____
SOCIAL SEC. #: _____

CASE NO.(S) _____ COURT: MAGISTRATE [] CIRCUIT [] COUNTY [] SUPREME []

CHARGES: _____

CASE TYPE: FELONY [] MISDEMEANOR [] PROBATION REVOC [] JUVENILE [] MENTAL HYGIENE []
ABUSE & NEG [] EXTRADITION [] CONTEMPT [] OTHER-SPECIFY: _____

BOND AMOUNT: \$ _____ WERE YOU ABLE TO MAKE BOND? YES [] NO []

DO YOU PLAN TO HIRE PRIVATE COUNSEL? YES [] NO [] HAVE YOU TRIED TO HIRE PRIVATE COUNSEL? YES [] NO []

RESULT: _____

**GROSS MONTHLY INCOME
from ALL Sources:**

Employer \$ _____
Spouse's Employment \$ _____
2nd Job \$ _____
Self-employment \$ _____
Public Assistance \$ _____
Food Stamps \$ _____
Unemployment Benefits \$ _____
Disability Benefits \$ _____
(Workers' Comp/VA/Social Security)
Social Security/SSI \$ _____
Alimony/Child Support Rcvd \$ _____
Pensions \$ _____
Rental Income \$ _____
Interest \$ _____
Dividends \$ _____
Annuities \$ _____
Odd Jobs \$ _____
Other \$ _____

(Explain) _____

MONTHLY TOTAL (all Sources) \$ _____

TOTAL ASSETS:

Cash \$ _____
Checking/Savings Accounts \$ _____
Monies Owed to You \$ _____
Tax Refunds Due \$ _____
Value of Real Estate \$ _____
(other than your residence)
Stocks \$ _____
Bonds \$ _____
Notes \$ _____
Other \$ _____

(Explain) _____

TOTAL ASSETS \$ _____

VEHICLE(S):

List Model and Year...

SPOUSE'S VEHICLE(S):

TOTAL MONTHLY EXPENSES:

Rent/Mortgage \$ _____
Car Payments \$ _____
Loan Payments \$ _____
Utilities \$ _____
(gas/elect/phone/water/sewage/heat)
Job-Related Expenses \$ _____
(uniform/transportation/protective
equipment/insurance premiums/
child care/health care)
Alimony \$ _____
Child Support \$ _____
TOTAL MONTHLY EXPENSES \$ _____

ONE - TIME EXPENSES:

Other One-Time Debts
You Currently Owe \$ _____
(Medical Bills/Car/Home Repairs)
(Explain) _____

NAMES OF DEPENDANTS SUPPORTED BY YOU:

LAST NAME	FIRST NAME	RELATIONSHIP	AGE	DISABILITIES	
1. _____	_____	_____	_____	_____	
2. _____	_____	_____	_____	_____	
3. _____	_____	_____	_____	_____	
4. _____	_____	_____	_____	_____	
5. _____	_____	_____	_____	_____	TOTAL NUMBER OF DEPENDANTS
6. _____	_____	_____	_____	_____	YOU SUPPORT: _____

WARNINGS!

(1) False Swearing may Result in Criminal Prosecution; (2) The Information in This Affidavit is NOT Confidential and May Be Made Available To Other Persons!

I understand that by Court Order as a condition of probation or otherwise, I may be held responsible for repayment of court costs and the cost of my attorney to the extent determined to be reasonable in relation to my financial circumstances, and that such court order will become a valid judgement against me until paid.

DATE: _____ SIGNATURE: _____

Taken, subscribed, and sworn or affirmed before me by _____ this ___ day of _____, _____ in _____ County, WV