

CONFIDENTIAL DOCUMENT

Case No: _____
Charges: _____

**AFFIDAVIT OF ELIGIBILITY* and
REQUEST FOR COURT APPOINTED ATTORNEY**

I am asking for appointment of an attorney in this case because I cannot pay for an attorney now without causing substantial hardship to myself or my dependent family. The following information is complete and accurate to the best of my knowledge, and I ask the court to use the information to decide whether I or my child can have an appointed attorney and payment of other defense costs at public expense. I understand that I can be required to document or verify this information. I understand that failure to do so could result in my request being denied, or if attorney has already been appointed, the withdrawal of attorney. I understand that if I do not tell the truth, I can be required to repay the cost to the state for providing court appointed attorney and/or I can be charged with a crime, and if convicted, I can be incarcerated. **BE SURE TO READ THE "ADVICE OF RIGHTS" FORM**

1. PERSONAL

Full Name of Applicant

FIRST NAME MIDDLE NAME LAST NAME

Residence Address

STREET ADDRESS Apt # CITY STATE ZIP

Mailing Address (if different)

Telephone No. () DOB SSN: ODL/ID: _____
AREA CODE MONTH / DAY / YEAR

Own Rent Length of time at this address No of persons living in household _____

Sex: Male Female Marital Status: Married Single Separated Divorced Other _____

Name and Age of Children: _____

2. EMPLOYMENT AND INCOME

Sources of income for you, spouse, dependents or household members for example, unemployment, child support, workers' compensation, disability, etc.:

Source of income – DESCRIBE	Amount	How long received	How often received
TANF / Food Stamps	\$ _____	_____	_____
Social Security / SSI	\$ _____	_____	_____
Unemployment Benefits	\$ _____	_____	_____
Retirement (Pension, 401K, IRA)	\$ _____	_____	_____
Tribal Benefits	\$ _____	_____	_____
Spousal/Child Support Received	\$ _____	_____	_____
Other	\$ _____	_____	_____

IF Employed:

Present Employer _____ How long _____ Occupation _____

Address _____ Telephone No () _____

Hourly wage \$ _____ Average hours per week _____ Net (after tax) monthly income \$ _____

If unemployed, how long since last employment _____ Previous employer _____

How long _____ Occupation _____

Pension/401K/IRA _____

Spouse's Employer _____ How long _____ Occupation _____

Address _____ Telephone No () _____

Hourly wage \$ _____ Average hours per week _____ Net (after tax) monthly income \$ _____

If unemployed, how long since last employment _____ Previous employer _____

How long _____ Occupation _____

Pension/401K/IRA _____

3. MONTHLY EXPENSES (Total: \$ _____)

List all expenses that are actually paid monthly by you individually, or by you jointly with spouse:

LIVING EXPENSES	UTILITIES	TRANSPORTATION	MISCELLANEOUS
Rent/ Mortgage:	Gas/Heat:	Vehicle Payment:	Medical:
Food:	Electrical:	Insurance:	Court Payment-Receipt:
Credit Card:	Water/Sewer:	Vehicle Gas:	Child Support Paid:
Cable/Internet:	Phone/ Cell Phone:	Parking:	Garnishment:
Other:	Trash/ Garbage:	Bus:	Child Care:

4. PROPERTY AND ASSETS OWNED BY YOU, SPOUSE AND DEPENDENTS

Cash \$ _____ If in custody, amount in jail or trust account \$ _____
Checking Account # _____ Bank/Credit Union _____ Balance \$ _____
Savings Account # _____ Bank/Credit Union _____ Balance \$ _____
Other Account # _____ Institution _____ Balance \$ _____

REAL ESTATE

Address (include city and state) Purchase Year Value Amount Owed Equity Available Payments Made to:
_____ \$ _____ \$ _____ \$ _____ _____
_____ \$ _____ \$ _____ \$ _____ _____

VEHICLES

Year, Make, and Model Value Amount Owed Payments made to:
_____ \$ _____ \$ _____ _____
_____ \$ _____ \$ _____ _____

Are any of these motor vehicles used for work (other than driving to and from work)? Yes No

MONEY OWED TO YOU BY OTHERS (tax refunds, judgments, trust funds, settlements, etc.): Name

of Debtor Owing You Money Amount Owed Date Expected
_____ \$ _____ _____
_____ \$ _____ _____

5. APPLICANT HISTORY

I have \$ _____ security / bail posted on this or other pending cases.

Have you ever requested a court appointed attorney before this application? Yes No

If "yes," my request for a court appointed attorney was: Approved Denied

In which county was your request? _____ Date _____ Charge(s) or type of case _____

I understand that I may be required to pay a \$20 application fee for the processing of this application. If I receive the services of a court appointed attorney, I understand that I may be required to pay a contribution amount and/or I may be required to reimburse the state for reasonable court appointed attorney fees and costs. Any order for payment of these fees or costs will be based upon my financial ability to pay. I understand I may request the court waive all or part of the potential fees and costs.

I acknowledge receipt of the Advice of Rights form by my initials here: _____

I certify and affirm that I have read the information contained in this form, personally completed this application or requested its completion, and that all statements contained herein are true and complete.

DATE

SIGNATURE OF APPLICANT

Applicant has completed this affidavit.

Applicant has requested or allowed court/release office personnel to complete affidavit utilizing information the applicant has provided.

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20____.

CLERK OF COURT

**RELEASE TO OBTAIN INFORMATION
FOR VERIFICATION**

SECTION 1

I understand that the court verifies my employment and financial situation to determine my eligibility for a court-appointed attorney. I understand that some of the information necessary for this verification is contained in records that may be protected by federal and state law. Because of this, I have signed the release below which allows public and private organizations and individuals to provide the court or its designee with requested information. I understand that organizations and individuals that may be contacted include, but are not limited to, those listed below:

Social Security Administration	State Department of Revenue	Mortgage Holders
Department of Motor Vehicles	Employment Department(s)	Utility Companies
Workers Compensation Disability Provider	Adult and Family Services Division	Landlords
Private Disability Insurance Provider	Private Life Insurance Provider	Current and Past Employers
Release Assistance Office	Credit Card Companies	Credit Bureaus
Banks, Savings and Loans, Credit Unions (requesting savings, stocks, bonds checking, loan, and credit information including copies of applications)		Schools and Colleges
		Other: _____

SECTION 2

RELEASE OF INFORMATION AUTHORIZATION

I understand that my records may have information that is protected by federal and state law. By signing below, I am allowing the release of my records directly to the court or its designee. I understand the reason for the request and disclosure of my records. I understand that this release remains in effect six months or until my case(s) is concluded or until I send a written request to the court revoking the release. A photocopy or facsimile (FAX) of my signature is as valid as the original.

Name: _____

Social Security No: _____

Date of Birth: _____

Indigent Defense Office
Clackamas County Courts
807 Main Street, Room 104
Oregon City, OR 97045

DATE

SIGNATURE OF APPLICANT

**LIMITED/SUPPLEMENTAL JUDGMENT FOR PAYMENT OF AN APPLICATION FEE/CONTRIBUTION AMOUNT (ACP)
NOTICE OF RIGHT TO SEEK REVIEW BY THE TRIAL COURT AND ADVICE OF RIGHT TO APPEAL**

Under ORS 137.020(5), we are advising you of your right to appeal and of the procedure for protecting your right to appeal a Limited or Supplemental Judgment for ACP.

RIGHT TO SEEK TRIAL-LEVEL REVIEW

Under ORS 151.487(5), you may ask for an immediate review of any ACP amount ordered to be paid by submitting a written request for reconsideration by the local trial court. This request may be submitted at any time.

RIGHT TO APPEAL

Under ORS 19.205(1), you also have a right to appeal to the Court of Appeals a Limited or Supplemental Judgment entered pursuant to ORS 151.487 ordering you to pay an ACP amount in connection with your request for court-appointed counsel. Your court-appointed counsel, if any, **CANNOT** assist you in submitting this request.

PROCEDURES FOR PROTECTING YOUR RIGHT TO APPEAL TO THE COURT OF APPEALS

The Oregon Revised Statutes and Oregon Rules of Appellate Procedures control appeals to the Court of Appeals in Salem. You could lose your right to appeal by not following them. The Oregon Rules of Appellate Procedure and forms for appeal may be accessed at <http://courts.oregon.gov>.

Within 30 days from the entry date of this court's judgment in the court register, you, or a retained attorney on your behalf, must:

1. Prepare a written and signed notice of appeal.
2. Serve copies of the notice of appeal on all parties, including the district attorney and the trial court administrator. If you want the transcript of oral proceedings to be part of the record on appeal, a copy of the notice of appeal must be served on the office of the trial court administrator, "Attention: Transcript Coordinator." Even if an audio or video record was made of the oral proceedings, rather than a stenographic record, serve the transcript coordinator with a copy of the notice of appeal.
3. File the original, signed notice of appeal and proof of service for the service listed in No. 2 above with the State Court Administrator, Appellate Court Records Section, 1163 State Street, Salem, OR 97301-2563.
4. Pay the filing fee required by the Court of Appeals.

While your case is on appeal, the trial court, if you ask, may stay your financial obligations. The Court of Appeals, if you ask, may stay your financial obligations pending appeal.

Filing for an appeal to the Court of Appeals will not stay or otherwise delay your underlying trial-level case.

Defendant / Applicant's signature indicates receipt of form: _____ Date _____

Right to Be Represented By Counsel, Eligibility for Court-Appointed Counsel, Application Fee, and Contribution Amount

You (or your child in a juvenile delinquency, dependency, or termination of parental rights case) have the right to have an attorney represent you in court on this matter. You may be financially eligible to have an attorney appointed by the court.

The court may require you to pay a \$20 Application Fee to determine whether you are eligible for court- appointed counsel. This fee is due even if your request for appointment of counsel is denied. Payment of this fee is due in full today. This fee may, in limited circumstances, be waived.

The court will determine if you can afford to hire an attorney. If you are eligible to have an attorney appointed, the court will determine whether you are “eligible and indigent” or “eligible and able to contribute”. If you have some available cash or liquid assets, but not enough to privately hire your own attorney, you may be ordered to pay a Contribution Amount to the court toward the cost of having court-appointed counsel.

If you are ordered to pay an Application Fee and a Contribution Amount, the amount ordered will be entered as a Limited or Supplemental Judgment in your case. Unless the Limited or Supplemental Judgment is later changed, you are required to pay these amounts regardless of the outcome of your case. Payment in full is due today.

You may request a hearing before the trial court at any time to contest any decision made on your application for appointment of counsel, including an order that you pay an Application Fee and a Contribution Amount. You also have a right to appeal a Limited or Supplemental Judgment ordering you to pay an Application Fee and a Contribution Amount. (See, Notice and Advice of Right to Appeal.)

Appointment of counsel cannot be denied, delayed, or withdrawn because of failure to pay the Application Fee and Contribution Amount ordered.

Financial Information Required

In order for the court to decide whether you are eligible for court-appointed counsel, you must provide information about your income, expenses, property, debts, and dependents on a financial statement, called an “Affidavit of Eligibility” or, if a juvenile in a juvenile cases, a “Juvenile Uniform Application Contribution Affidavit”. Financial information on your spouse, if you have one and others in your household may also be required. If you are charged with failure to pay court-ordered obligations, you may wish to talk to an attorney prior to completing the affidavit.

The financial information provided to the court will be reviewed. You (and generally your spouse) must sign a Release of Information for Verification. This allows the court to obtain information from others to verify your financial situation. You may also be asked to provide proof of debts, property, and income (such as recent wage stubs).

Your social security number is requested on the Affidavit of Eligibility. Your provision of this number is voluntary. You cannot be compelled to provide it nor denied court-appointed counsel for failure to provide it. However, providing your social security number will likely speed the processing of your request for court-appointed counsel. By providing your social security number, you are acknowledging that it may be used to verify your financial information, and it may be used for collection purposes.

Information you provide on the financial statement is held confidential from the general public. The Release of Information for Verification, allows your address to be given to court staff to update court records and allow verification of the financial information you provide. The information on the financial statement may be provided to the district attorney in limited circumstances (as noted below). The information you provide may be used by the court, the Oregon Department of Revenue, or their assignees, for the purpose of collecting delinquent amounts owed to the state.

Changes in Your Financial Situation and Possible Actions if You Provide False Financial Information

If your financial situation changes during your case, you must tell the court. The court may appoint counsel if counsel was previously denied, waive the Contribution Amount if an amount was ordered, or end the appointment of counsel.

If the court has reason to believe you knowingly provided false information, your financial statement may be sent to the district attorney for possible filing of criminal charges, your appointed attorney may be withdrawn, and you may be required to repay the cost to the state of providing court-appointed counsel.

At the End of the Case - Recovery of Public Defense Costs

At the end of the case, you may be ordered to repay all or part of the cost of court-appointed services provided and not previously paid by you as a Contribution Amount. This is called "recoupment." Recoupment will be ordered if the court determines you are, or may be, financially able to repay these costs.

If you (or your child in a juvenile matter) are provided court-appointed counsel in any case in which the first accusatory instrument or petition was filed after January 1, 1998, you may, depending on your financial situation, be ordered to pay recoupment, regardless of the outcome of the case. If you are provided court-appointed counsel in a non-criminal case or in a limited number of criminal cases or probation violation proceedings in which the first accusatory instrument or petition was filed on or before January 1, 1998, you will not be ordered to pay recoupment unless you are convicted of a crime charged in the case.

If you are ordered to pay recoupment, any amount you have been ordered to pay as a Contribution Amount at the beginning of the case will offset or reduce the recoupment amount owed in the current action. Even if no recoupment is ordered, you will remain responsible for paying any \$20 Application Fee and a Contribution Amount previously ordered in a Limited or Supplemental Judgment that has not been paid, unless you petition the court for a full or partial waiver of the amount(s) previously ordered due to a change in your financial situation.

If your financial situation gets worse and you are unable to pay the recoupment amount or meet the schedule of payments ordered by the court, you may request a change in the repayment schedule or court order.

If you fail to pay the recoupment amount as ordered and:

- payment was a condition of probation, in addition to contempt of court and civil judgment enforcement remedies set out below, you may be ordered to show cause why your probation should not be revoked; or
- payment was not ordered as a condition of probation, the court may order you to show cause why you should not be held in contempt of court or the court, the Department of Revenue, or their assignees may pursue collection of the recoupment amount. All civil judgment debtor protections and exemptions will be available to you.