

IN THE SUPERIOR COURT OF WALKER COUNTY  
STATE OF GEORGIA

STATE OF GEORGIA

INDICTMENT/ACCUSATION NO: \_\_\_\_\_

VS.

CHARGE(S) : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPLICATION FOR APPOINTMENT OF COUNSEL  
AND CERTIFICATE OF FINANCIAL RESOURCES

I am the defendant in the above-styled action. I am charged with the offense(s) of \_\_\_\_\_  
\_\_\_\_\_

which IS/ARE a FELONY/MISDEMEANOR. I CAN/CANNOT afford to hire a lawyer to assist me. I DO/DO NOT want the court to provide me with a lawyer. I understand that I am providing this information in this declaration in order for the court to determine my eligibility for a court-appointed lawyer, paid by Walker County, to defend me on the above charges.

In Jail \_\_\_\_\_ Out on Bond \_\_\_\_\_ Arrest Date \_\_\_\_\_

1. Name: \_\_\_\_\_ Telephone No: ( ) \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_  
Soc. Sec. No: \_\_\_\_\_  
Highest grade in school completed: \_\_\_\_\_
2. If employed, employer is \_\_\_\_\_ Net take home pay is (gross pay minus state,  
federal & social security taxes): \_\_\_\_\_ (weekly) \_\_\_\_\_ (monthly)
3. If unemployed, how long? \_\_\_\_\_ List other sources of income such \_\_\_\_\_ as unemployment compensation,  
welfare or disability income and the amount received per week or month: \_\_\_\_\_
4. Are you married? \_\_\_\_\_ Is spouse employed? \_\_\_\_\_ If yes, by whom? \_\_\_\_\_  
Spouse's net income: \_\_\_\_\_ (weekly)
5. Number of children living in home: \_\_\_\_\_ Ages: \_\_\_\_\_
6. Dependents (other than spouse or children) in home. Give names, relationship, and amount contributed to their  
support: \_\_\_\_\_
7. Do you own a motor vehicle? \_\_\_\_\_ Year and model: \_\_\_\_\_  
How much do you owe on it? \_\_\_\_\_
8. Do you own a home? \_\_\_\_\_ Value: \_\_\_\_\_ How much do you owe on it? \_\_\_\_\_
9. Amount of house payment or rent payment each month? \_\_\_\_\_
10. List checking or savings accounts or other deposits with any bank or financial institution and the amount of  
deposits \_\_\_\_\_

11. List other assets or property, including real estate, jewelry, notes bonds or stocks \_\_\_\_\_  
\_\_\_\_\_
12. List indebtedness and amount of payments \_\_\_\_\_  
\_\_\_\_\_
13. List any extraordinary living expenses and amount (such as regularly occurring medical expenses) \_\_\_\_\_  
\_\_\_\_\_
14. Child support payable under any Court Order \_\_\_\_\_
15. Do you understand that whether you are convicted or acquitted Walker County may seek reimbursement of attorney's fees paid for you if you become financially able to pay or reimburse the county but refuse to do so? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you swear that the information you have given herein is true and correct and understands that a false answer to any item may result in a charge of perjury? Yes \_\_\_\_\_ No \_\_\_\_\_

This \_\_\_\_\_ day of \_\_\_\_\_, 2003.

\_\_\_\_\_  
Defendant's Signature

Sworn to and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 2003.

\_\_\_\_\_  
Notary Public  
My commission expires \_\_\_\_\_

### **ORDER**

Having considered the above matter, it is the finding of this court that the above-named defendant IS/IS NOT indigent under criteria of the Georgia Criminal Justice Act and appropriate court rules and IS/IS NOT entitled to have appointed counsel.

It is ordered that \_\_\_\_\_ an attorney practicing in this county, is hereby appointed to represent the defendant in the above case.

Let the defendant and the assigned attorney be notified hereof and furnished a copy of this application and order.

This \_\_\_\_\_ day of \_\_\_\_\_, 2003.

\_\_\_\_\_  
JON BOLLING WOOD  
CHIEF JUDGE OF SUPERIOR COURT,  
LOOKOUT MOUNTAIN JUDICIAL CIRCUIT