

Circuit/General Sessions Court Montgomery County Clarksville, Tennessee	UNIFORM AFFIDAVIT OF INDIGENCY page 1 of 3	Case Number
State of Tennessee vs. _____		

BY SIGNING THIS AFFIDAVIT, YOU AUTHORIZE THE OFFICE OF THE APPOINTED COUNSEL COMMISSION TO OBTAIN CREDIT, EMPLOYMENT, AND PROPERTY REPORTS TO VERIFY YOUR RESPONSES.

ALL OF THE INFORMATION REQUESTED ON THIS FORM, INCLUDING THE CONFIDENTIAL EXHIBIT, MUST BE COMPLETED FOR THE JUDGE TO DETERMINE INDIGENCY.

Comes the defendant and, subject to the penalty of perjury, makes oath to the following facts (please list, circle, complete, etc.):

PART I

1. Full Name: _____
2. Are you working anywhere? Yes () No () Where _____
3. How much money do you make? _____ (weekly, monthly, etc.)
4. Do you receive any governmental assistance or pensions (disability, SSI, AFDC, etc.)? Yes () No ()
What is its value? _____ (weekly, monthly, etc.)
5. Do you own any property (house, car, bank acct., etc.): Yes () No ()
What is its value? _____
6. Are you, or your family going to be able to post your bond? Yes () No ()
7. Are you, or your family going to hire a private attorney? Yes () No ()
8. Are you now in custody? Yes () No ()
If so, how long have you been in custody? _____
(If the defendant is in custody, unable to make bond and the answers to questions one (1) through eleven (11) make it clear that the defendant has no resources to hire a private attorney, skip Part II and complete Part III. If Part II is to be completed, do not list items already listed in Part I.)

PART II

9. I have met with following lawyer(s), have attempted to hire said lawyer(s) to represent me, and have been unable to do so:

Name _____	Name _____
Address _____	Address _____

10. All my income from all sources (including, but not limited to wages, interest, gifts, AFDC, SSI, social security, retirement, disability, pension, unemployment, alimony, worker's compensation, etc.):

\$ _____ per _____ from _____

\$ _____ per _____ from _____

\$ _____ per _____ from _____

11. All money available to me from any source:

- A. Cash _____
- B. Checking, Saving, or CD Account balance _____
- C. Debts owed me _____
- D. Credit Card(s)- balance (Visa, Mastercard, American Express, etc.) _____
- E. Other _____

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12. All vehicles/vessels owned by me, solely or jointly, within the last six months (including but not limited to cars, trucks, motorcycles, farm equip., boats etc.):

_____	value \$ _____	amt. owed _____
_____	value \$ _____	amt. owed _____
_____	value \$ _____	amt. owed _____

13. All real estate owned by me, solely or jointly, within the last six months (including land, lots, houses, mobile homes, etc.):

_____	value \$ _____	amt. owed _____
_____	value \$ _____	amt. owed _____

14. All assets or property not already listed owned within the last six months or expected in the future:

_____	value \$ _____	amt. owed _____
_____	value \$ _____	amt. owed _____

15. The last income tax return I filed was for the year _____ and it reflected a net income of \$ _____.
 I will file a copy of same within one week if required.

16. I am out of jail on bond of \$ _____ made by _____. The money to make bond, \$ _____
 was paid by _____.

PART III

17. Acknowledging that I am still under oath, I certify that I have listed in Parts I and II all assets in which I hold or expect to hold any legal or equitable interest.

18. I am financially unable to obtain the assistance of a lawyer and request the court to appoint a lawyer for me.

19. I understand that it is a **Class A misdemeanor** for which I can be sentenced to jail for up to 11 months 29 days or be fined up to \$2500.00 or both if I intentionally or knowingly misrepresent, falsify, or withhold any information required in this affidavit. I also understand that I may be required by the Court to produce other information in support of my request for an attorney.

20. **I EXPRESSLY AUTHORIZE THE OFFICE OF THE APPOINTED COUNSEL COMMISSION TO OBTAIN REPORTS ON MY CONSUMER CREDIT, EMPLOYMENT OR PROPERTY OWNERSHIP TO VERIFY THE STATEMENTS MADE IN THIS AFFIDAVIT AS PERMITTED BY 15 U.S. CODE §1681B(A)(2) AND (3)(B). BY MY SIGNATURE BELOW, I HEREBY AUTHORIZE ALL CORPORATIONS, FORMER EMPLOYERS, CREDIT AGENCIES, EDUCATIONAL INSTITUTIONS, CITY, STATE, COUNTY AND FEDERAL COURTS AND AGENCIES, MILITARY SERVICES TO RELEASE ALL INFORMATION THEY MAY HAVE ABOUT MY FINANCIAL STATUS, EMPLOYMENT HISTORY OR PROPERTY OWNERSHIP.**

This _____ day of _____, _____.

 Defendant

Sworn to and Subscribed before me this ____ day of _____, _____.

 Court Clerk

 Judge

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CONFIDENTIAL EXHIBIT

The information requested on this Exhibit is not subject to public inspection. Pursuant to Tenn. Code Ann. § 10-7-503, the custodian of this record must seal this Exhibit and prohibit public inspection, unless disclosure is ordered by a court of competent jurisdiction.

21. Social Security No.: _____	22. Birth date: _____
23. Any other names ever used: _____	24. Address: _____
25. Telephone Nos.: (Home) _____ (Work) _____ (Other) _____	
26. Names & ages of all dependents:	
_____	Age: _____ relationship _____
_____	Age: _____ relationship _____
_____	Age: _____ relationship _____
_____	Age: _____ relationship _____
_____	Age: _____ relationship _____
27. Checking, Saving, or CD Account(s)- numbers with, balance	

28. Credit Card(s)-account numbers with balance, credit limit, and type (Visa, Mastercard, American Express, etc.)	

I EXPRESSLY AUTHORIZE THE OFFICE OF THE APPOINTED COUNSEL COMMISSION TO OBTAIN REPORTS ON MY CONSUMER CREDIT, EMPLOYMENT OR PROPERTY OWNERSHIP TO VERIFY THE STATEMENTS MADE IN THIS AFFIDAVIT AS PERMITTED BY 15 U.S. CODE §1681B(A)(2) AND (3)(B). BY MY SIGNATURE BELOW, I HEREBY AUTHORIZE ALL CORPORATIONS, FORMER EMPLOYERS, CREDIT AGENCIES, EDUCATIONAL INSTITUTIONS, CITY, STATE, COUNTY AND FEDERAL COURTS AND AGENCIES, MILITARY SERVICES TO RELEASE ALL INFORMATION THEY MAY HAVE ABOUT MY FINANCIAL STATUS, EMPLOYMENT HISTORY OR PROPERTY OWNERSHIP.

This _____ day of _____, _____.

Defendant