GILA COUNTY CASE#_____

# DEFENDANT'S FINANCIAL STATEMENT

**WARNING: It is a felony to intentionally withhold or submit false or misleading information to a court. The maximum penalty is $150,000 fine and/or 1.5 years in prison.**

I, _____, petition this Court for the appointment of an attorney.

**The court may appoint you an attorney if it is found that you are financially unable to provide one for yourself.**

Name: _____ Social Security# _____ Date of Birth: _____

Marital Status: ☐ SINGLE ☐ MARRIED ☐ DIVORCED ☐ SEPARATED ☐ LIVE IN COMPANION #YOU SUPPORT _____

Please provide the following concerning those you support

| NAME | AGE | RELATIONSHIP |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Physical Address: _____
City: _____ State: _____ Zip: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Work Phone : _____
Cell Phone: _____
Email Address: _____

**INCOME**

YOUR MO. INCOME _____
SPOUSE'S INCOME _____
OTHER SOURCE(S)
Child Support Income _____
Alimony/Maintenance _____
Pension _____

TOTAL MO. INCOME $ 0.00

| | |
|---|---|
| Mo. Income | $ 0.00 |
| Mo. Liabilities | $ 0.00 |
| Net Monthly Income | $ 0.00 |

**ASSETS**

NAME OF BANK(S) _____

Checking Acct. Balance _____
Savings, CD, Market _____
401K, IRA, Stocks _____
Cash Value Ins. _____
Vehicle(s) Make/Model/Yr VALUE

OTHER ASSETS VALUE

REAL ESTATE Equity VALUE

TOTAL ASSETS $ 0.00

**DEBT**

List Debts to Bank, Charge Acct., Credit Cards
Name of Creditor Balance Mo. Pmt

**HOME:** ☐ RENT ☐ OWN _____
Utilities _____
Alimony/Support Monthly Pmt. _____
Food Expenses _____
Medical Expenses _____
Transportation Mo. Pmt. _____
Court Fines (currently paying) _____
Other Expenses _____

TOTAL MONTHLY LIABILITIES $ 0.00

I understand that providing false and/or incomplete information to the court may result in further legal action against me. The Court has my permission to make any necessary inquiries to verify the information provided or to obtain any additional information required by the Court or its representatives.

**BE ADVISED** that failure to pay your fines and complete other sentencing requirements will result in any or all of the following:

- A warrant being issued for your arrest
- Suspension of your driver's license
- Suspension of your ability to register your vehicles
- Assignment to a collection agency
- Attachment of any tax refunds
- Certain liens may be attached to your property

**I swear (affirm) under penalty of perjury that the preceding information is true and correct**

_____ Defendant's Signature

_____ Date

☐ APPROVED ☐ DENIED APPLICATION FOR COURT APPOINTED ATTORNEY.

_____ Date

_____ By: