

Cause # _____

STATE OF TEXAS
VS

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)

IN THE _____ COURT
OF LUBBOCK COUNTY, TEXAS
Any other Court in which this case may be filed, assigned or transferred

REQUEST FOR ATTORNEY FORM

LSO _____ PID _____ Charge _____ Bond _____

On the _____ day of _____, 2007, at _____ a.m./p.m. I was advised by the Magistrate/or Judge of :

(1) the accusation against me for which I have been arrested; (2) my right to retain counsel, (3) my right to remain silent, (4) my right to have a lawyer present during any interview by peace officers or attorneys representing the State about the allegations, (5) my right to stop an interview at any time, (6) and right to an examining trial prior to indictment on a felony arrest warrant filed in Justice Court or felony arrest.

I have further been advised of my right to request the appointment of counsel to represent me if I can not afford an attorney. If I make bond, or otherwise released, I understand that if I am unable to afford an attorney that I can apply for a court appointed attorney at arraignment. I understand if I do not request an attorney to represent me at this time and it develops that I am unable to afford to hire an attorney to represent me and I remain in jail, I will have to obtain a request form and financial information sheet from the jail personnel, fill it out and turn it in.

I understand that if I request an attorney at this time, my request and financial information sheet that I am required to fill out at this time will be forwarded to the court in which the case is filed or designated appointing judge on a warrantless arrest to review and appoint an attorney, if I qualify, under the standards for a court appointed attorney. If I make bond and have requested and received a court appointed attorney, I understand I am required to report to Pre-Trial Services to do a financial assessment for report to the Judge. I further understand if I make bond after receiving a court appointed attorney, I will be required to make minimum monthly payments I can afford to be applied toward reimbursement of court appointed attorney fees. I may be required to report to the court to reevaluate my indigency status for material changes in my economic status and be required to pay my court appointed attorney directly or reimburse the county for court appointed attorney fees.

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I have been advised by the magistrate, or Judge Presiding, of my right to request appointment of counsel to represent me and ask by the magistrate or Judge Presiding, if I want to request appointment of counsel: I DO NOT REQUEST THE COURT TO APPOINT COUNSEL.

Signature _____

I swear or affirm before the Magistrate or Judge Presiding that I am without means to employ counsel of my own choosing and I hereby request the court to appoint counsel for me. I have filled out the financial information form and received assistance if needed in filling out the same:

Signature _____

SWORN to under oath this _____ day of _____, 2007, by the Magistrate/Judge Presiding.

Or Notary

Magistrate/Judge Presiding

FINANCIAL INFORMATION FOR REQUEST FOR COURT APPOINTED ATTORNEY

Cause # _____ Court _____

Name: _____ sex: male _____ female _____
LAST FIRST MIDDLE

Address: _____

Date of Birth: _____ Citizenship: _____ U.S. _____ Other _____ Language _____

High School Diploma/GED: _____ yes _____ no _____ Highest grade completed _____

Marital Status: Single _____ Divorced _____ Married _____ Widowed _____ Widowed/Separated _____

Number of Dependent living with Defendant: _____

Social Security #: _____ Driver's License #: _____

Current Financial Status:

Employer: _____ Address _____

Salary/Hourly Wage _____ Phone: _____

How Long Employed? _____ Hours Per Week: _____

_____ I am currently in jail, unable to obtain the funds to hire an attorney and/or make bond and/or cannot make bail on the offense with which I am charged because bond is denied.

EXPENSES per month:

- _____ Rent/Mortgage
- _____ Utilities
- _____ Groceries
- _____ Car Payment
- _____ Gas (a month)
- _____ Medical
- _____ Insurance
- _____ Other (personal loans)
- _____ Life Insurance
- _____ Bonding Company (a month)
- _____ Court Ordered Fees
- _____ Miscellaneous Expenses
- _____ Other liabilities/debts

NET INCOME per month:

- _____ Defendant's Income
- _____ Spouses income (SSI)
- _____ Child Support

ASSETS:

- Property owned, cars, real estate, stocks, savings accounts: (1) _____
- (2) _____
- (3) _____
- (4) _____
- (5) _____

Child support _____

_____ Total Monthly Expenses

I have been advised by the court of my right to representation by counsel in the trial of the charge pending against me. I hereby swear or affirm the above information is true and correct, I certify that I am without means to employ counsel of my own choosing and I request the Court to appoint an attorney to represent me in the above cause.

DATE

DEFENDANT'S SIGNATURE