CASE NO. 09CF 015789

APPLICATION	FOR CRIMINAL INDIGENT STATUS
AM SEEKING THE APPOINTMENT OF THE PUBLIC DEFENDER OR	·
I HAVE A PRIVATE ATTORNEY OR AM SELF-REPRESENTED AND	SEEK DETERMINATION OF INDIGENCE STATUS FOR POSTS
Notice to Applicant: The provision of a public defender/court appointed lawyer and property you own to pay for legal and other services provided on your behalf or on be if the application fee is not paid to the Clerk of the Court within 7 days, it will be adde making this affidavit on behalf of a minor or tax-dependent adult, the information con	costs/due process services are not free. A judgment and lien may be imposed against all real or personal shalf of the person for whom you are making this application. There is a \$50.00 feater each application ided to any costs that may be assessed against you at the conclusion of this case. When are a parent/guardian tained in this application must include your income and assets.  of include a working spouse or yourself.)
1. I have dependents. (Do not include children not living at home and do n	of include a working spouse or yourself.)
	eekly () semi-monthly () monthly () yearly overtime, tips and similar payments, minus deductions required by law and other court ordered
3. I have other income paid () weekly () bi-weekly () semi-monthly () monthly ( Social Security benefits	) yearly: (Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No".)  No Veterans' benefit
4. I have other assets: (Circle "yes" and fill in the value of the property, otherwise  Cash	No         Savings
5. I have a total amount of liabilities and debts in the amount of \$	
6. I receive: (Circle "Yes" or "No.")	
Poverty- related veterans' benefits	Yes No
7. I have been released on bail in the amount of \$ Cash	Surety Other
	a determination of indigent status under s. 27.52, F.S. commits a misdemeanor of the first degree, e information I have provided on this Application is true and accurate to the best of my
Signed this day of, 20	black D
Date of Birth	Signature of applicant for indigent status
Driver's license or ID number	Print full legal name Address City, State, Zip Phone number
CLI	ERK'S DETERMINATION
Based on the information in this Application, I have determined the	e applicant to be ( Indigent ( ) Not Indigent
The Public Defender is hereby ap to the case listed above Dated this day of, 20	until relieved by the Court.
	Clerk of the Circuit Court
(P)	
This form was completed with the assistance of	Clerk/Deputy Clerk/Other authorized person
PPLICANTS FOUND NOT INDIGENT MAY SEEK REVIEW BY ASKING	· ·
not industry.	FOR A HEARING TIME. Sign here if you want the judge to review the clerk's decision of
	FOR A HEARING TIME. Sign here if you want the judge to review the clerk's decision of
an) 4	FOR A HEARING TIME. Sign here if you want the judge to review the clerk's decision of