

FINANCIAL AFFIDAVIT  
In Support of Request to be Assigned Counsel

NOTICE: IF AN ATTORNEY IS ASSIGNED TO YOU, YOU MAY BE REQUESTED TO REPAY THE COUNTY OF ULSTER FOR ALL OR PART OF THE COST OF YOUR DEFENSE

PERSONAL INFORMATION

- |   |  |
|---|--|
| 1. Name _____                               | 5. Names And Ages of Children And/Or Spouse Who Are Supported By You _____ |
| 2. Date Of Birth _____                      | _____  |
| 3. Home Address (P.O. Box & Street #) _____ | _____  |
| _____                                       | 6. Are You Claimed As A Dependant On Another's Tax Return? _____           |
| _____                                       | 7. Your Social Security # _____  |
| 4. Your Telephone # _____                   | 8. Marital Status: Single/Married/Divorced _____                           |
|   | His/Her Full Name _____  |

EMPLOYMENT INFORMATION

- |   |  |
|---|--|
| 1. Are You Receiving Social Services _____              | 6. If Unemployed, Who Supports You? _____                    |
| 2. Occupation (If Student, Give School Name) _____      | _____  |
| 3. Name, Address & Phone # Of Employer _____            | 7. If Spouse Is Employed, What Is Their Take Home Pay? _____ |
| _____   | 8. Do You Own Your Home Or Pay Rent? _____                   |
| 4. Amount Of Take Home Pay _____                        | If You Own, Indicate The Approximate Market Value _____      |
| 5. How Much Money Did You Earn in 2019 _____ 2018 _____ | 9. Amount Owed On Mortgage _____                             |
|   | Name of Bank To Which Payments Are Made _____                |

OTHER INCOME INFORMATION

1. Income From Rental Property \_\_\_\_\_
2. Social Security, Welfare, Worker's Compensation Or Disability Income \_\_\_\_\_
3. Amount Of Cash On Hand (Bank Account Amounts) \_\_\_\_\_
4. Year, Make & Model Of Your Car \_\_\_\_\_
5. Stocks, Bonds Or Retirement Accounts \_\_\_\_\_
6. Other Assets \_\_\_\_\_

Under penalties of perjury, I declare that I have examined the following statements made by me and aver to the best of my knowledge and belief they are all true and accurate. I hereby authorize the Court and/or Public Defender to make inquiries to verify the answers I have given. I further agree to repay the County of Ulster for money expended on my behalf during the course of my defense.

Affirmed On \_\_\_\_\_ Signed \_\_\_\_\_

IF THE ACCUSED IS LESS THAN 21 YEARS OLD AND RESIDES WITH EITHER ONE OR BOTH PARENTS, EACH PARENT MUST COMPLETE HIS/HER OWN FINANCIAL AFFIDAVIT BEFORE ANY ASSIGNMENT OF COUNSEL MAY BE GIVEN. (THIS INCLUDES ANY PARENTS LIVING IN A SEPARATE HOUSEHOLD).