IN THE CIRCUIT/COUNTY COURT OF THE NINTH JUDICIAL CIRCUIT
IN AND FOR OSCEOLA COUNTY, FLORIDA

STATE	OF FL	orida	VS.

CASE NO._____

Defendant/Minor Child APPLICATION FOR CRIMINAL INDIGENT STATUS I 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 COSTS A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under s. 27.52, F.S. commits a misdemeanor of the first degree, punishable up to 1 year in jail or up to \$1,000 in fines, as provided in s. 775.082, F.S. or s. 775.083, F.S. I attest that the information provided on this application is true and accurate.
□ I HAVE A PRIVATE ATTORNEYOR AM SELF-REPRESENTED AND SEEK DETERMINATION OF INDIGENCE STATUS FOR COSTS A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under s. 27.52, F.S. commits a misdemeanor of the first degree, punishable up to 1 year in jail or up to \$1,000 in fines, as provided in s. 775.082, F.S. or s. 775.083, F.S. I attest
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Signed on Signature of applicant for indigent status
Print full legal name:
Year of Birth Address:
City, State, Zip:
Last four digits of Driver's License or ID Number Phone number:
E-mail Address:
Notice to Applicant: There is a \$50.00 fee for each application filed. The public defender/court appointed lawyer and costs/due process services are not free and a lien may be imposed on all property you own. If you are a parent/guardian making this affidavit on behalf of a minor or tax-dependent adult, the information contained in this application must include your income and assets.
1. I havedependents. (Do not include children not living at home and do not include a working spouse or yourself.)
2. I have take home pay of \$ paid \u2225 weekly \u2225 bi-weekly \u2225 semi-monthly \u2225 monthly \u2225 weekly \u2225 semi-monthly \u2225 monthly \u2225 yearly <i>Include cash payments</i> . Take home pay (net income) is total salary and wages, minus deductions required by law, including court-ordered support payments
3. I have other income paid weekly bi-weekly semi-monthly monthly yearly: (Check "Yes" and fill in the amount if you have this kind of income, otherwise check "No.")
Social Security benefits
Union payments
Retirement/pensions \Box Yes \$ \Box No Rental income \Box Yes \$ \Box No
Trusts or gifts \Box Yes \Box No Dividends or interest \Box Yes \Box No
Veterans' benefit \Box Yes \Box No Other kinds of income not on the list \Box Yes \Box No
4. I have other assets: (Check "yes" and fill in the value of the property, otherwise check "No")
Cash□Yes \$□No Bank/Savings account(s)□Yes \$□No
*Car/Motor Vehicle
Money market accounts
*Boats/other tangible property
*show loans on these assets in paragraph 5
Check one: I DO/ DO NOT expect to receive more assets in the near future. The asset and value is
5. I have total liabilities and debts in the amount of \$ I have loan balances on assets in paragraph 4: Car/Motor Vehicle \$; Homestead \$; Non-homestead real estate \$;
Boat \$; Other tangible property (identify here) and loan balance \$
6. I receive: (Check all applicable payments received)") □ Temporary Assistance for Needy Families- Cash Assistance □ Poverty- related veterans' benefits □ Supplemental Security Income (SSI)
7. I have been released on bail in the amount of \$ □ Cash □ Surety Posted by: □ Self □ Family □ Other
CLERK DETERMINATION
Based on the information in this Application, I have determined the applicant to be () Indigent () Not Indigent
The Public Defender is hereby appointed to the case listed above until relieved by the Court.
Dated thisday of, 20
Clerk of the Circuit Court, by Deputy Clerk
APPLICANTS FOUND NOT INDIGENT MAY SEEK REVIEW BY ASKING FOR A HEARING TIME. Sign here if you want the judge to review the clerk's decision of not indigent: