
Defendant's Name

Defendant's Address

City, State & Zip

Telephone

**IN THE MUNICIPAL JUSTICE COURT
CITY OF HEBER CITY, STATE OF UTAH**

STATE OF UTAH
 CITY OF HEBER

Plaintiff,

vs.

Defendant.

AFFIDAVIT OF INDIGENCY

Case No. _____

Judge _____

Defendant provides the following information required by Utah Code Section 77-32-202

DEFENDANT'S FINANCIAL INFORMATION

Fill out the following table completely.

Employer's Name & Address	Monthly Net Income	Monthly Gross Income
Alimony received		
Child Support received		
Income in the past 12 months from any other non-governmental source including business, profession or other self-employment; rent payments; interest or dividends; pensions, annuities, or life insurance payments; gifts or inheritance		
Income from government financial support including social security benefits, AFDC, worker's compensation, veterans noneducational benefits, housing, food, or other living allowances paid to members of the military, clergy, and others.		

If Defendant is currently not employed: _____ Date & state of last employment

_____ Salary/wages per month when last employed

Amounts in cash or in any bank accounts including savings and checking	
Amounts owing to Defendant including accounts receivable	

List of home, land or other real property and vehicles or other personal property owned in whole or in part by Defendant, its location and its approximate value. Include any real or personal property which Defendant has transferred to a third party since the date of the offense alleged in the information.

Property	Location	Value

List of Defendant's debts.

To whom owed	Amount	To whom owed	Amount

List of Defendant's monthly expenses.

	Amount		Amount		Amount
Food		Gas		Other (list)	
Clothing		Water			
Transportation		Sewer			
Mortgage/rent		Car Payments			
Electricity		Medical Payments			

DEFENDANT'S DEPENDENTS:

Name	Age	Relationship	Name	Age	Relationship

STATE OF UTAH)
)ss
COUNTY OF _____)

Being sworn, I state that I, _____, am the Defendant; that I have read this Affidavit and the statements in it are true and correct to the best of my knowledge; and that due to my poverty I am unable to bear the expenses of hiring an attorney to defend myself in this proceeding.

(Signature of Defendant)

Subscribed and sworn before me on _____

NOTARY PUBLIC
My Commission Expires

ORDER ON AFFIDAVIT OF INDIGENCY
(To be filled out by the judge)

THE COURT HEREBY incorporates the facts set out in the Defendant's Affidavit of Indigency, with any modifications indicated verbally on the court record or written below; and finds as follows:

_____ Defendant is indigent.

_____ Defendant is not indigent.

_____ Modifications, if any:

IT IS HEREBY ORDERED:

_____ Under Utah Code Title 77, Chapter 32, _____ is appointed to represent Defendant in the above referenced case.

_____ Under Utah Code Title 77, Chapter 32, Defendant is not entitled to appointed defense counsel in the above referenced case.

DATED this _____ day of _____, 20____.

BY THE COURT:

JUDGE