

MAINE JUDICIAL BRANCH

STATE OF MAINE

V.

"X" the court for filing:☐ Superior Court ☐ District Court☐ Unified Criminal Docket

County: _____

Location (Town): _____

Docket No.: _____

Defendant

MOTION AND AFFIDAVIT FOR ASSIGNMENT OF COUNSEL

I am requesting the Court to assign an attorney at public expense, based on the following accurate information.

Name of person whose financial information appears on this affidavit: _____I am ☐ single ☐ married ☐ divorced ☐ widowed.

Mailing address: _____

Residential address: ☐ same as mailing address

Date of birth (mm/dd/yyyy): _____ Email: _____

Telephone number (working with voicemail): _____

Message number: _____ Alternate phone number: _____

I live ☐ alone ☐ with spouse/significant other ☐ with parents ☐ with friends ☐ other _____I have _____ children; age(s) _____ ☐ who live me ☐ for whom I pay childsupport of \$ _____ per _____. I am current on my child support: ☐ Yes ☐ No**INCOME:**Salary/Gross income: \$ _____ per ☐ year ☐ month ☐ week **OR** ☐ hourly wage \$ _____

and number of hours per week _____

I receive (*select all that apply*):☐ Social Security \$ _____ ☐ Unemployment \$ _____☐ TANF \$ _____ ☐ Alimony/Child support \$ _____☐ Food stamps \$ _____ ☐ Maine Care/Housing/WIC \$ _____

Total monthly income: \$ _____

Employer: _____ Length of employment: _____

If unemployed, last date employed (mm/yyyy): _____ Place of employment: _____

Taxes: Last filed (mm/yyyy): _____

☐ Refund paid to me: \$ _____ ☐ Refund taken by State of Maine: \$ _____**ADA Notice:** The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk.**Language Services:** For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

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ASSETS:Cash bail posted (1st party) in this case or any other case: \$ _____

Cash on hand or at home: \$ _____ Cash in the bank: \$ _____ Money owed to you: \$ _____

Name of bank/FCU: _____

Stocks/Bonds/401K/403B/Pensions: _____

Property worth more than \$250 (*include property owned alone or with other people*):

Home and land: \$ _____ Amount owed on property: \$ _____

Vehicle(s) year/make/model: _____

Amount financed: \$ _____

Recreational vehicle(s)/ATV/boat/snowmobile (year/make/model): _____

Other (personal-TV/computer/electronics, etc.): _____

EXPENSES (Monthly):

Mortgage/Rent: \$ _____ Cable/Internet: \$ _____ Loan (student): \$ _____ Atty. fees: \$ _____

Food: \$ _____ Heat: \$ _____ Loan (personal): \$ _____ Rx: \$ _____

Cell phone: \$ _____ Car insurance: \$ _____ Prop. taxes: \$ _____ Other: \$ _____

Utilities: \$ _____ Credit card: \$ _____ Court fees/fines: \$ _____ Other: \$ _____

Renter/Homeowners insurance: \$ _____

Total expenses: \$ _____

I acknowledge that disclosure of my Social Security account number is mandatory under 36 M.R.S. § 185-A. My Social Security account number may be used to facilitate the collection of money that I may owe the State of Maine as a result of having had an attorney assigned to represent me if it is later determined that I am to be responsible for all or part of the attorney fees and costs.

SS Number Disclosure Required on separate form

The undersigned furnishes the above information to support the request for assignment of counsel. **I have read the above form, I understand it, and the answers to the questions are true. I understand that any false answers on this form may subject me to criminal prosecution.** I also understand that I have a continuing obligation, personally and through counsel, to report to the court any changes in my employment or other financial circumstances. I also understand that further investigation may be conducted to verify the information I have provided, and I agree, as a condition of my continued eligibility to be represented by assigned counsel, to cooperate with any such investigation, including providing documents or authorizations to release information requested by the court or by the Maine Commission on Public Defense Services.

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☐ I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000 if I give false information to the court.

Date (mm/dd/yyyy): _____



Signature of Applicant

Subscribed and sworn to before me,



☐ Notary ☐ Clerk ☐ Attorney ☐ Judge/Justice

Financial Screener's Recommendation: _____

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