STATE OF FLORIDA vs.				CASE NO				
Defendant/Minor C	hild	ADD	I ICATION EOD	CDIMINAL INI	DIGENT STATUS			
		AFF	LICATION FOR	CKIMINAL INI	DIGENT STATUS			
I AM SEEKI	NG THE APPOINTMENT OR	OF THE PUBLIC D	EFENDER					
I HAVE A P	RIVATE ATTORNEY OR A	AM SELF-REPRES	ENTED AND SEE	EK DETERMINA	TION OF INDIGENCE STATUS F	OR COSTS		
property you own to If the application fee	pay for legal and other service is not paid to the Clerk of the	es provided on your Court within 7 days,	behalf or on behalf of it will be added to a	of the person for who ny costs that may b	ces are not free. A judgment and lien om you are making this application. To assessed against you at the conclument include your income and assets.	There is a \$50.00 fee for sion of this case. If you	r each application filed.	
1. I have	dependents. (Do not include o	children not living at h	ome and do not incl	lude a working spo	use or yourself.)			
					() monthly () yearly payments, minus deductions required	d by law and other cour	t ordered	
3. I have other in	come paid () weekly () bi-we	ekly () semi-monthly	() monthly() year	ly: (Circle "Yes" ar	nd fill in the amount if you have this kin	nd of income, otherwise	circle "No".)	
Social	Security benefits	Yes \$	No		ns' benefit Yes	\$	_ No	
Unemp	loyment compensation	Yes \$	No	Child st	upport or other regular support m family members/spouse Yes	¢	No	
Worker	s compensation	res p Yes \$	No	Rental	incomeYes	\$	_ No	
Retirem	nent/pensions	Yes \$	No	Divider	nds or interestYes	\$	No	
Trusts	or gifts	Yes \$	No.		kinds of income not on the listYes			
4 I have other as	sets: (Circle "yes" and fill in	the value of the prope	erty otherwise circle	: "No ")				
Cash		Yes \$	No	Savings	Yes	\$	No	
Bank a	ccount(s)	Yes \$	No	Stocks/bon	dsYes	\$	_ No	
	ates of deposit or			*Equity in Re	eal estate (excluding homestead) Yes	\$	_ No	
n *= ::	noney market accounts	Yes \$	No	*include e	expectancy of an interest in such prope	erty		
	in Motor vehicles/Boats/ Other tangible property	Yes \$	No					
5. I have a total an	nount of liabilities and debts	s in the amount of \$	<u> </u>					
6. I receive: (Circ	le "Yes" or "No.")							
Tempo	rary Assistance for Needy Far	nilies-Cash Assistand	-Δ			Yes	No	
							No	
							No	
7. I have been rele	eased on bail in the amount	of \$	Cash	_Surety	Posted by: Self Fami	ly Other _		
					ent status under s. 27.52, F.S. commi e provided on this Application			
Signed this	day of, 20	·						
Date of Birth				nature of applica	int for indigent status		_	
Driver's license or ID number				nt full legal name				
Divor o mooneo o	TID Hambol			dress				
				y, State, Zip				
			Ph	one number				
			OI EDI	O DETERMINA	TION.			
			CLERK	'S DETERMINA	HON			
Based o	n the information in this Ap	oplication, I have d	etermined the app	olicant to be ()	Indigent () Not Indigent			
The Pub	lic Defender is hereby app	ointed to the case	listed above until	relieved by the 0	Court.			
Dated this	day of		20					
					Clerk of the Circuit Court			
					CIEIR OI LIIE CIICUIL COUIL			
	This form was comple	eted with the assist	ance of		01.1/9			
					Clerk/Deputy Clerk/Other author	orized person		
APPLICANTS FO	OUND NOT INDIGENT MA	AY SEEK REVIEW	BY ASKING FO	R A HEARING T	IME. Sign here if you want the	judge to review th	e clerk's decision o	
					- •	- -		

IN THE CIRCUIT/COUNTY COURT OF THE ____

_____JUDICIAL CIRCUIT __ COUNTY, FLORIDA