

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): TELEPHONE NO: _____ FAX NO. (Optional) _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CRUZ 701 Ocean Street, Room 120 Santa Cruz, 95060 Santa Cruz Branch	
THE PEOPLE OF THE STATE OF CALIFORNIA vs. DEFENDANT:	
DEFENDANT FINANCIAL ELIGIBILITY STATEMENT FOR APPOINTMENT OF COUNSEL AND REIMBURSEMENT	CASE NUMBER

1. Defendant Personal Information

Address: _____
 Date of Birth: _____ Phone Number: _____ Marital Status: _____
 Spouse Name (if applicable): _____ Number of Dependents: _____

2. Defendant Employment Information

Are You Employed: Yes No (If No, is job pending Yes No) How Long Employed (Yrs/Mos): _____
 Name of Employer: _____ Gross Pay Per Month: \$ _____
 Spouse Gross Pay Per Month: \$ _____ Name of Spouse Employer: _____

3. Defendant Financial Information

Total Monthly Income (All Sources + Gross Pay): \$ _____ Total Monthly Expenses: \$ _____
 Personal Savings and/or Assets: Yes No If Yes, How Much: \$ _____
 Do You Own Real Estate or a Home: Yes No If Yes, What is the Value: \$ _____
 Addresses of All Property: _____
 Please explain means of support if income is less than expenses: _____

4. Defendant understands that he/she may be responsible to pay a \$50 appointment fee: Yes

5. Eligibility for Appointment of Counsel and Notice to Defendant: If an attorney is appointed to represent you and your case results in a felony or misdemeanor conviction, the Court may hold a hearing at the end of the criminal proceeding to determine your ability to pay all or a part of the cost associated with the legal assistance provided to you. You could be required to pay the costs of any appointed attorney in accordance with your ability to pay. The Court designates County Counsel as the "County Officer" to make an inquiry into your ability to pay before the hearing. Any court order to pay for legal fees will have the same force and effect as a judgment in a civil action and will be subject to execution.

I declare under penalty of perjury that the foregoing is true and correct and that I understand the information described in paragraph number five (5), and that this declaration was executed on:

Date: _____ at (County) _____, California. _____
Signature of Defendant