CONFIDENTIAL

APPLICATION FOR PUBLIC DEFENDER SUSQUEHANNA COUNTY COURT HOUSE, PO BOX 218, MONTROSE, PA 18801 (570) 278 - 4600 EXT. 6681 FAX (570) 278 - 7036

WARNING:

SUPPLYING FALSE, MISLEADING OR INCOMPLETE INFORMATION IN ORDER TO SECURE FREE LEGAL REPRESENTATION (TO WHICH YOU ARE NOT ENTITLED), MAY RESULT IN CIVIL AND CRIMINAL LIABILITY.

Personal Information:

1.	Last name	e:					
2.	D-1 (D: 11			×			
3.	Address:	Street of City	r Box		State:	Zip):
4.	Phone:	Work:					
5.	If you	are	а	school	student,	explain	fully:
							ť.
6.	Who do yo	ou live wi	ith:				
7.	YOUR Ma	rital Stat	us: Si	ngle / Mar	ried / Divord	ced / Separ	ated
8. 9.	Spouse's of	occupatio gross pay	n and per v	l employer week: \$			

Employment: THIS SECTION MUST BE FILLED OUT COMPLETELY! ANY BLANKS WILL RESULT IN DENIAL.

10.	Do YOU work? □ yes □ no
11. been	If you are employed, where do you work and how long have you employed there:
12.	How many hours per week do you work:
13.	How much are you paid per hour: \$
14.	If not paid hourly, what is your weekly pay: \$
	If you do not work, how do you support yourself and / or your ndents:
16.	Do you have any Children? Yes / No How many?
	Do you pay Support? Yes / No How Much per month?
17.	Your total personal income for the last tax year:\$
18.	Total household income for the last tax year: \$
19. assis	If you or anyone you live with receives any type of public tance, explain completely:
****	*******************
Fina	ncial Information AND Property Information
20. :he ja	How much money do you have on your person, at home, AND at sil:
21.	How much money do you have in bank accounts: \$
22.	If you own a vehicle, how much is it worth: \$
23.	How much do you have left to pay: \$

24.	If you own your own home, much is	it worth:	\$
25.	. How much do you have left to pay:		\$
26.	. How much do you pay per month in r	ent:	\$
AN) OR	**** IF YOU OWN, OR HANY VALUE REG WHERE IT IS EXPLAIN COMPLETE	ARDLESS	INTEREST IN
***	***********	******	·********
FRA	NOT LEAVE THIS SECTION BLANK. AT YOU PROVIDE INFORMATION REG ARGES.	IT IS VER	Y IMPORTANT OUR PENDING
27.	List all pending charges:		
	A)D)	2	
	B) E)		
	C)F)		
28.	If bail has been set, what is the bail ar		
	When is your Preliminary hearing		
30.	At What Magistrates:		i e
31. are th	Were any other people charged in this they:	crime witl	h vou, and who
32.	Name, address and phone number of a		
****	**********	<*******	*******

In light of my financial condition, defender's office represent me free of charge	I ge.	request	that	the public
Signature:	D	ated:		

AFFIDAVIT:

- 1. I am the applicant for free legal counsel.
- I am unable to procure sufficient funds to obtain legal counsel.
- 3. All the information provided in this application is the truth.
- I understand that false statements herein may subject me to the civil and criminal penalties outlined in the Public Defender Act.

Signature:	_ Dated:	
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Failure to sign will result in immediate denial of service!