



Lake County
Court of Common Pleas
Juvenile Division

Judge Karen Lawson

This form may require a filing fee, please refer to the Fee Schedule.

**INSTRUCTIONS FOR FILLING OUT FINANCIAL
DISCLOSURE AFFIDAVIT OF INDIGENCY FORMS**

**EACH LINE MUST CONTAIN A DOLLAR AMOUNT OR A
ZERO. DO NOT WRITE "NONE" OR "N/A" OR DRAW ANY
LINES IN SPACES OR COLUMNS!!**

**FILLING THE FORM OUT IMPROPERLY MAY AFFECT
APPROVAL OF YOUR APPLICATION.**

**COMPLETED FORMS MUST BE SWORN TO IN FRONT OF
A DEPUTY CLERK OR A NOTARY.**

Signature

Print Name

Case Number

Date



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REQUEST FOR COURT APPOINTED COUNSEL

Your application to obtain court appointed counsel will be reviewed by the proper authority. They will consider your financial status as well as the type of issue to be addressed in Court.

Your financial qualification is determined based upon indigency guidelines established by the State.

The Court is only authorized and allowed to appoint attorneys to be paid at public expense for the following cases:

1. Delinquency cases in which your child is charged with committing a crime.
2. Unruly cases in which your child is charged with committing a status offense. Examples: Truancy, curfew, tobacco.
3. Cases in which a parent is accused of child abuse, child neglect, or it is claimed that the child is a dependent child. These cases are usually filed by the Department of Job and Family Services.
4. Cases which are filed pursuant to the Interstate Compact Law (Ohio Revised Code 2151.56-2151.61).
5. Contempt of Court. Cases in which you are charged with being in contempt of Court by the State of Ohio or by a state agency.
6. Criminal cases in which you are charged with a crime; such as contributing to the delinquency or unruliness of a child or for non-support.
7. Cases in which the State, or a state agency has filed a Writ of Habeas Corpus against you.

The Court cannot appoint an attorney to represent you in any other type of case including the following:

- A. Complaints to determine whether a parent-child relationship exists, formerly called paternity cases.
- B. Cases to determine or modify custody of, or visitation with children.
- C. Cases to determine, modify or enforce child support.
- D. Cases transferred to this Court from Domestic Relations Court.
- E. Any other civil case. A civil case is any case that does not include the possibility that you may be incarcerated.

THE COURT WILL NOT DENY YOU THE RIGHT TO APPLY FOR AN ATTORNEY. THERE IS, HOWEVER, A \$25.00 NON-REFUNDABLE FEE. IF YOUR CASE IS ONE OF THOSE LISTED IN A-E, IT IS PROBABLE THAT YOUR REQUEST WILL BE DENIED BUT YOUR RIGHT TO APPLY WILL NOT BE DENIED.

Name

Phone

Address

Date of Application

City State Zip

State briefly the reason for requesting court appointed counsel. Describe the issue that would require a court hearing.

Is there an existing case filed in the Lake County Juvenile Court? Yes No

If yes, what is the case number? _____

=====
DETERMINATION OF YOUR REQUEST
=====

- APPROVED The Court has appointed Attorney _____ to represent you.
FEE You will be represented by the Public Defender.
DENIED You should contact your attorney or the Public Defender for an appointment.
DENIED You do not qualify for court appointed counsel for the following reason:
You are not indigent as per the guidelines
Your issue does not qualify for the court appointed counsel.

Date of Determination: _____

Determined By: _____

Title: _____

FINANCIAL DISCLOSURE/AFFIDAVIT OF INDIGENCY
 (\$25.00 application fee may be assessed—see notice on reverse side)

I. PERSONAL INFORMATION

Name/Applicant: _____ Party Represented (if applicant, enter "same") D.O.B. _____

Mailing Address: _____ City _____ State _____ ZIP _____

Case No. _____ Phone () _____ Message Phone (within 48 hours) () _____

II. OTHER PERSONS LIVING IN HOUSEHOLD

Name	D.O.B.	Relationship	Name	D.O.B.	Relationship
1) _____	_____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____	_____

III. MONTHLY INCOME/EMPLOYMENT INFORMATION

Type of Income	Applicant	Spouse (or Parents if applicant is a juvenile)	Other Household Members	Total
Employment (Gross)	_____	_____	_____	_____
Unemployment	_____	_____	_____	_____
Worker's Comp.	_____	_____	_____	_____
Pension/Social Security	_____	_____	_____	_____
Child Support	_____	_____	_____	_____
Works First/TANF	_____	_____	_____	_____
Disability	_____	_____	_____	_____
Other	_____	_____	_____	_____

IV. ALLOWABLE EXPENSES

Type of Expense	Amount
Child Support Paid Out	_____
Child Care (if working only)	_____
Transportation for Work	_____
Insurance	_____
Medical/Dental	_____
Medical & Associated Costs Of Caring for Infirm Family Members	_____
B. EXPENSES	\$ _____

V. TOTAL INCOME

A. TOTAL INCOME	B. EXPENSES	C. ADJUSTED TOTAL INCOME
\$ _____	\$ _____	\$ _____

Total Income - Allowable Expenses = Adjusted Total Income

VI. ASSET INFORMATION

Type of Asset	Describe / Length of Ownership / Make, Model, Year (where applicable)	Price:\$	Date Purchased:	Amt. Owed:\$	Estimated Value
Real Estate / Home					
Stocks / Bonds / CD's					
Automobiles					
Trucks / Boats / Motorcycles					
Other Valuable Property					
Cash on Hand					
Money Owed to Applicant					
Other					
Checking Acct. (Bank / Acct. #)					
Savings/MM Acct. (Bank / Acct. #)					

D. TOTAL ASSETS

\$ _____

