

APPLICATION FOR PUBLIC DEFENDER SERVICES AND PROMISE TO PAY

**Application will be denied if responses are not complete or application lacks sufficient information to determine financial status*

*Last Name: _____ *First Name: _____ MI: _____
 SSN: _____ - _____ - _____ *Date of Birth: ____/____/____
 Address: _____ Apt/Ste #: _____ City: _____ State: _____ Zip: _____
 Cellphone: _____ Alternate Number: _____ Email: _____
 Race: _____ Gender: _____ Are you a full-time student? Yes ___ No ___
 *Marital Status (check one): Single ___ Separated ___ Married ___ → Spouse name: _____
 Are you in custody? No ___ Yes ___ → Where? _____
 Are you out on bond? No ___ Yes ___ → Total bond amount: _____ Amount paid: _____ Who paid it? _____
 What are the charges against you? _____
 In what county(ies) are you facing charges? _____
 Case Number(s): _____
 Are you represented by an attorney? No ___ Yes ___ → Name: _____ Amount paid: \$ _____

Eligibility Determination

Application will be denied if this section is not completed. Responses will be verified to the fullest extent possible

1. *Are you receiving Food Stamps, WIC, TANF, Medicaid, Public Housing, Childcare Assistance, or any other type of public assistance?
 ___ No ___ Yes → Type(s) of assistance: _____ Monthly Amount(s): _____
2. *Are you currently employed? Name of most recent employer: _____ Date last employed: _____
 ___ No ___ Yes → Income from employment: \$ _____ per hour and _____ hours per week
3. *Are you receiving any other income? OR \$ _____ per month
 ___ No ___ Yes → If yes, list the full **MONTHLY** amount for each box below. Responses required for all, including zeroes.

Spouse Income if married ^a	Parent Income if dependent ^b	Unemployment Compensation	Social Security	SSI or Disability	Retirement or Pension	Other Income (specify source)
\$	\$	\$	\$	\$	\$	\$

4. Do you have any monthly expenses? List full **MONTHLY** amount for each box below. Only list expenses if payments are being made.

Rent	Mortgage	Utilities	Car Payment	Food/Living Expenses	Child Care	Child Support	Medical Expenses	Other Expenses (specify)
\$	\$	\$	\$	\$	\$	\$	\$	\$

5. Your last month total income: \$ _____
6. How are you supported financially? _____
7. *Do you own a home or property? Provide Address: _____ Year Purchased: _____
 ___ No ___ Yes → details: Purchase Price: _____ Amount (\$) Still Owed: _____
8. *Do you own any vehicles? Provide How many? _____ → List the Year/Make/Model of each vehicle and any amounts still owed:
 ___ No ___ Yes → details: _____
9. *Do you have cash, bank accounts, stocks, bonds, jewelry, life insurance with current cash value, or any other valuable belongings?
 ___ No ___ Yes → List ALL with dollar values: _____
10. How many children are you legally required to provide for? _____ → please list their ages: _____

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a. Spouse's income to be listed unless spouse is the alleged victim
 b. Parents' income to be listed if under 18 and dependent on parent(s) for support unless parent is alleged victim in the crime charged, or over 18 and full-time student, or dependent upon parent, or parent posted bond.

FEES

I understand that if I am accepted as a client by the Missouri State Public Defender (MSPD), I will owe a fee as set out in the chart below, even if I hire a private attorney after I apply for and am accepted by the Public Defender. No fee will be assessed for applicants who are charged as a juvenile or are under the age of 18 at the time of applying.

Entry with early withdrawal	\$25
Misdemeanors and Probation Violation Cases	\$125
Felonies, Appeals and Post-Conviction Relief	\$375
Felony Sex Cases	\$500
Murder Non-Capital and Civil Commitment Cases	\$750
Capital Murder Case	\$1,500

ACKNOWLEDGMENT AND PROMISE TO PAY

- I understand that lying on this application constitutes a crime.
- I understand this Application and Promise to pay is not a confidential attorney-client communication. The Public Defender may provide it to other government authorities (including the court) for determining eligibility for services.
- I understand MSPD may contact government agencies, credit bureaus, employers, banks or other financial institutions to verify my financial situation.
- My signature constitutes authorization for release of this information to MSPD.
- By signing, I agree that I am requesting the Public Defender to open cases in all of my pending criminal cases and represent me, and that I promise to pay the sum set out in the Fee section above on any case in which the Public Defender agrees to representation.
- I understand that MSPD may collect this fee in cases where the Public Defender has undertaken representation based on this application from monies payable to me such as income tax refunds and/or lottery winnings.
- I consent to MSPD utilizing electronic communication regarding my cases unless I have indicated otherwise by checking one or more of the following boxes: Do Not Text Do Not Email
- I understand that if accepted, I am entitled to my legal file at the conclusion of my case and that if I do not request my file within 10 years from the conclusion of representation, it may be destroyed.



Applicant Signature

Date

NOTICE

Every person charged or under suspicion of committing a crime punishable by jail or imprisonment is entitled to a lawyer. If you cannot afford to hire a lawyer without substantial financial hardship to you or your dependents, the state will provide a lawyer for you if:

- You are detained or charged with a felony, including appeals from a felony conviction;
- You are detained or charged with a misdemeanor which will probably result in confinement in jail, including appeals from a conviction in such a case;
- You are detained or charged with a violation of probation and the judge determines your due process rights require a lawyer;
- When the federal constitution, state constitution or any law of this state requires the appointment of a lawyer.

Be advised that MSPD uses electronic communication, including but not limited to email and text messaging. Be aware that: (1.) electronic communication is not a secure method of communication; (2.) any electronic communication that is sent to you or by you may be copied and held by any or all computers or other devices through which it passes as it is transmitted; and, (3.) persons not participating in our communication may intercept our communications by improperly accessing either of our computers or other devices or another computer or device unconnected to either of us through which the electronic communication has passed. In the event you do not wish this form of communication, please notify MSPD; until such notification is received, MSPD may communicate with you electronically.

For MSPD Use Only – DO NOT COMPLETE

Income verified through Department of Labor. Last quarter wages: _____

Approved _____ Denied _____ Signed: _____ Date: _____

NCD: _____ Division: _____ Confined/Bond: _____ Location _____

Charges/Comments: _____