

AFFIDAVIT OF SUBSTANTIAL HARDSHIP AND ORDER
(Request for Court-Appointed Attorney and/or to Waive Fees)

Court Case Number _____

IN THE _____ COURT OF _____ COUNTY, ALABAMA
(Circuit, District, Municipal) (Name of County or Municipality)☐ State of Alabama
☐ Municipality of _____ v. _____, defendant

I, because of financial hardship (check all that apply):

- ☐
- am unable to hire an attorney and request that the court appoint one for me;
-
- ☐
- am unable to pay for ignition interlock device fees in this case and request that these fees be waived; and/or
-
- ☐
- am unable to pay the expungement petition administrative filing fee and request that these fees be waived.

AFFIDAVIT1. **Identification.**

Full Name _____ Date of Birth _____

Spouse's Full Name (if married) _____

Email address _____

☐ I do not have an email address.Complete Home Address _____

Total Number of People I am Supporting Financially in Household Including Myself _____

Home Telephone Number _____

Cellular Telephone Number _____ ☐ I do not have a cellular telephone.

State & Last 4 Digits of Driver License's Number _____ Last 4 Digits of SSN _____

Employer's Name & Address _____

Employer's Telephone Number _____

2. **Assistance.** Benefits. Some of the residents in my household or I receive benefits from any of the following sources (*check those which apply*)

- ☐
- Social Security Income (SSI)
- ☐
- Disability
- ☐
- Temporary Assistance for Needy Families (TANF)
-
- ☐
- Food Stamps
- ☐
- Medicaid
- ☐
- Other _____.

The monthly value of these benefits combined is _____.

3. **Income/Expense Statement.****Monthly Gross Income**

My monthly gross income is \$ _____

My spouse's monthly gross income (unless a marital offense) is \$ _____

My other monthly earnings (commissions, bonuses, interest income, etc.) are \$ _____

The combined monthly income received by other members of my household is \$ _____

Monthly Unemployment / Worker's Compensation, Social Security, Retirements, etc. \$ _____

Child Support Payment(s)/Alimony Received \$ _____

Other Monthly Income (be specific): \$ _____
_____3a. **Total Monthly Gross Income** \$ _____

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COURT CASE NUMBER

3. Income/Expense Statement (continued)

The monthly expenses I pay are:

Rent/Mortgage \$ _____

Total Utilities: Gas, Electricity, Water, etc. \$ _____

Food \$ _____

Clothing \$ _____

Healthcare/Medical Insurance \$ _____

Car Payment(s)/Transportation Expenses \$ _____

Loan Payments \$ _____

Credit Card Payment(s) \$ _____

Educational/Employment Expenses \$ _____

Cell Phone Expenses \$ _____

Other Expenses (be specific): \$ _____

3b. Subtotal Monthly Expenses \$ _____

3c. Child Support Payment(s)/Alimony (Subtotal) \$ _____

3d. Exceptional Expenses (Subtotal) \$ _____

3e. Total Monthly Expenses (Add Totals from 3b., 3c., and 3d. monthly only) \$ _____

Total Gross Monthly Income (3a.) Minus Total Monthly Expenses (3e.) \$ _____

4. Assets. My assets are as follows:

Cash on Hand/Bank (or otherwise available such as stocks, bonds, certificates of deposit) \$ _____

Equity in Real Estate (value of property less what you owe) \$ _____

Equity in Personal Property, etc. (such as the value of motor vehicles, stereo, TV, electronics, furnishing, jewelry, tools, guns, less what you owe) \$ _____

Other (be specific): _____ \$ _____

Do you own anything else of value? (land, house, boat, TV, stereo, jewelry)

☐ Yes ☐ No If so, describe: _____ \$ _____

Total Assets \$ _____

5. Affidavit/Request

I swear or affirm that the answers are true and reflect my current financial status. I understand that a false statement or answer to any question in the affidavit may subject me to the penalties of perjury. I authorize the court or its authorized representative to obtain records of information pertaining to my financial status from any source in order to verify information provided by me. I further understand and acknowledge that, if the court appoints an attorney to represent me, the court may require me to pay all or part of the fees and expenses of my court-appointed counsel, in addition to all or part of the costs associated with this case.

Sworn to and subscribed before me this

(Affiant's Signature)

_____ day of _____, _____

(Signature of Officer Authorized to Administer Oaths/Notary Public) (Print or Type Name)

(Notary Public Only: My Commission expires on _____ (Date)).

ORDER ON AFFIDAVIT OF SUBSTANTIAL HARDSHIP
(Request for Court-Appointed Attorney and/or Waiver of Fees)

COURT CASE NUMBER

IN THE _____ COURT OF _____ COUNTY, ALABAMA
(Circuit, District, Municipal) (Name of County or Municipality)

State of Alabama

Municipality of _____ v. _____, defendant

The Court has considered the Affiant's testimony, his or her poverty level as measured by the United States poverty guidelines and the potential for substantial hardship that payment by the Affiant would cause. IT IS, THEREFORE, ORDERED AND ADJUDGED BY THE COURT AS FOLLOWS:

☐ The request is **DENIED**.☐ The Court finds that the Affiant is NOT INDIGENT pursuant to § 15-12-1, et seq., Ala. Code 1975.☐ The case or situation is not one for which the request is applicable.☐ Other (please specify): _____.☐ The Affiant is **INDIGENT**. Further, affiant has the following income level based on the United States poverty guidelines:☐ at or below 125%; or☐ greater than 125% but less than 200%. However, the Court finds that not providing indigent defense services would cause the Affiant substantial hardship; or☐ greater than 200%. However, the Affiant is charged with a felony, and the Court finds that not providing indigent defense services would cause the Affiant substantial hardship.☐ The following fees shall be assessed as follows:☐ Ignition interlock device fees are waived.☐ Expungement fees shall be waived.☐ Other (please specify): _____.☐ The request for appointment of counsel is **GRANTED**, and _____ is hereby appointed as counsel for the Defendant.☐ The Affiant is able to contribute monetarily toward payment of the fees of his or her appointed counsel and/or the fees and costs of this case. Therefore, the Affiant is ordered to pay \$_____ to the clerk of court for his or her appointed attorney and \$_____ toward his or her fees and costs. Said fees and costs shall be due as follows: \$_____ monthly.

IT IS FURTHER ORDERED AND ADJUDGED that the court reserves the right and may order reimbursement of attorney's fees and other expenses, fees, and costs.

Done this _____.
(Date) (Signature of Judge)