FINANCIAL DISCLOSURE / AFFIDAVIT OF INDIGENCY

(\$25.00 application fee may be assessed—see notice on reverse side)

		I. PERSONA	L INFORMA	TION				
Applicant's Name		D.O.B.	Person Represented's Name (if juvenile)			D.O.B.		
Mailing Address			City		State	Zip Code		
Conc. No.								
Case No.			Phone ()		Cell Phone			
II. OTHER PERSONS LIVING IN HOUSEHOLD								
Name	D.O.B.	Relationship	Name		D.O.B.	Relationship		
1)		·	3)		· · · · · · · · · · · · · · · · · · ·	•		
2)			A)					
2)		III. PRESUM	4) PTIVE ELIGIE	BILITY				
The appointment of counsel is presumed if the person represented meets any of the qualifications below. Please place an 'X'								
Ohio Works First / TANF: SSI: SSD: Medicaid: Poverty Related Veterans' Benefits: Food Stamps:								
Refugee Settlement Benefits: Incarcerated in state penitentiary: Committed to a Public Mental Health Facility:								
Other (please describe):				Juvenile: (if i	wenile, please co	ontinue at Section VIII)		
					, promit			
		IV. INCOME	AND EMPL					
		Applicant		Spouse {Do not include spouse's income if spouse is alleged victim}		Total Income		
Gross Monthly Employment Income								
Unemployment, Worker's Compensati	on, Child							
Support, Other Types of Income	_		***************************************	T	OTAL INCOME	: -		
				•		· L-Y		
Employer's Name:	***************************************		Pł	ione Number:				
Employer's Address:								
		V. 110	UID ASSETS					
Type of Asset				Estimated Value				
Checking, Savings, Money Market Acco	ounts		\$	\$				
Stocks, Bonds, CDs		·	\$					
Other Liquid Assets or Cash on Hand			\$					
Total Liquid Assets		\$						
		VI. MONT	HLY EXPEN	SES				
Type of Expense		Amount	_	oe of Expense		Amount		
Child Support Paid Out			Tel	ephone				
Child Care (if working only)			Tra	nsportation / Fuel				
Insurance (medical, dental, auto, etc.)			Tax	es Withheld or Owed				
Medical / Dental Expenses or Associate Caring for Infirm Family Member	ed Costs of		Cre	dit Card, Other Loans				
Rent / Mortgage	•		Uti	lities (Gas, Electric, Water / Sew	er, Trash)			
Food			Oti	ner (Specify)				
	EXPENSES	\$		· · · · · · · · · · · · · · · · · · ·	EXPENSES	\$		
		VII DETERMINA	TION OF IN	IDICENCY		-		

VII. DETERMINATION OF INDIGENCY

If applicant's Total Income in Section IV is at or below 187.5% of the Federal Poverty Guidelines, counsel must be appointed.

For applicants whose Total Income in Section IV is above 125% of the Federal Poverty Guidelines, see recoupment notice in Section XI.

If applicant's Liquid Assets in Section V exceed figures provided in OAC 120-1-03, appointment of counsel may be denied if applicant can employ counsel using those liquid assets.

If applicant's Total Income falls above 187.5% of Federal Poverty Guidelines, but applicant is financially unable to employ counsel after paying monthly expenses in Section VI, counsel must be appointed.

VIII. \$25.00 APPLICATION FEE NOTICE

By submitting this Financial Disclosure / Affidavit of Indigency Form, you will be assessed a non-refundable \$25.00 application fee unless waived or reduced by the court. If assessed, the fee is to be paid to the clerk of courts within seven (7) days of submitting this form to the entity that will make a determination regarding your indigency. No applicant may be denied counsel based upon failure or inability to pay this fee.

	IX. AFFIDAVIT OF INDIGENCY					
l,	(applicant or alleged of	elinquent child) being duly sworn, state:				
1.	, , , , , , , , , , , , , , , , , , , ,					
	 I understand that I must inform the public defender or appointed attorney if my financial situation should change before the disposition of the case(s) for which representation is being provided. 					
	I understand that if it is determined by the county or the court that legal reprovided, I may be required to reimburse the county for the costs of represe by the county to collect legal fees hereunder must be brought within two year representation was provided.	ntation provided. Any action filed				
4.	I understand that I am subject to criminal charges for providing false financia this application for legal representation, pursuant to Ohio Revised Code sections.	l information in connection with ons 120.05 and 2921.13.				
5. I hereby certify that the information I have provided on this financial disclosure form is true to the best of my knowledge.						
	Affiant's signature	Date				
	·					
	Notary Public / Individual duly authorized to administer oath:	11				
	Subscribed and duly sworn before me according to law, by the above named					
	,, at County of	, State of				
	Ohio.					
;	Signature of person administering oath Title (example: Notary	, Deputy Clerk of Courts, etc.)				
	Signature of person administering oath X. JUDGE CERTIFICATION	, Deputy Clerk of Courts, etc.)				
	X. JUDGE CERTIFICATION					
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Instructions for completing form OPD-206R, the Financial Disclosure / Affidavit of Indigency form, as revised January 2012

Section I. Personal Information

Complete this section with the applicant's name, contact information, and case number. If the person who will be represented by court-appointed counsel is a juvenile, also include the juvenile's name in the box marked "Person Represented's Name (if juvenile)."

Section II. Other Persons Living in Household

Complete this section with the names of those with whom the applicant lives, who either have a duty to support the applicant or for whom the applicant has a duty to support, such as a spouse or dependent children. Do not include information about persons who share a household with the applicant but with whom the applicant shares no duty to support, such as roommates.

Section III. Presumptive Eligibility

If the applicant is currently receiving assistance from any of the governmental assistance programs listed in this section, check the line(s) next to the name of the program(s). Since that applicant has already been screened and deemed eligible for assistance by another government agency, you may presume the applicant's eligibility for court-appointed counsel. An applicant who is committed to a public mental health facility or who is incarcerated in a state penitentiary at the time of application may be presumed to be indigent and eligible for court-appointed counsel. All juveniles are presumed indigent and eligible for court-appointed counsel. Information in Sections IV – VI does not need to be collected for a juvenile who is requesting court-appointed counsel. (However, an adult requesting court-appointed counsel in a juvenile proceeding, such as a parent in an A/D/N case, must complete Sections IV – VI.) See Ohio Administrative Code section 120-1-03 (C).

Section IV. Income and Employer

Complete this section with the gross monthly income and other financial support received by the applicant, including the name and contact information of their employer. If the applicant indicated in Section III that the applicant receives assistance from any of the listed programs, include the amount of monthly assistance received through that program in the second box of this section, which includes "other types of income."

Compare the dollar amount in the box labeled Total Income in this section to OPD's Indigent Client Eligibility Guidelines. If the applicant's Total Income falls at or below

187.5% of the federal poverty guidelines on this chart, the applicant must be given court-appointed counsel. See <u>OAC 120-1-03</u> (B). See Section V instructions below for potential ineligibility.

Section V. Liquid Assets

Complete this section with information about the applicant's liquid assets. An applicant's liquid assets can make an applicant ineligible for court-appointed counsel, even if his or her income falls below the guidelines. See OAC 120-1-03 (D)(2)-(3).

Section VI. Monthly Expenses

OAC 120-1-03 states that the "pivotal issue in determining indigency is not whether the applicant ought to be able to employ counsel but whether the applicant is, in fact, able to do so." Therefore, an applicant whose gross monthly income falls above 187.5% of the federal poverty guidelines may still qualify for court-appointed counsel. If an applicant whose income exceeds 187.5% believes he or she is financially unable to employ counsel, complete this section with information about the applicant's basic monthly expenses.

Section VII. Determination of Indigency

If the applicant's Total Income in Section IV is at or below 187.5% of the Federal Poverty Guidelines, counsel must be appointed.

Applicants whose Total Income in Section IV is above 125% of the Federal Poverty Guidelines can be subject to recoupment.

If the applicant's Liquid Assets in Section V exceed figures provided in OAC 120-1-03, appointment of counsel may be denied if the applicant can employ counsel using those liquid assets.

If the applicant's Total Income falls above 187.5% of Federal Poverty Guidelines, but is financially unable to employ counsel after paying the monthly expenses in Section VI, counsel must be appointed.

VIII. \$25.00 Application Fee Notice

This section provides notice to the applicant that he or she will be assessed a non-refundable \$25 application fee when submitting this form, unless that fee is waived or reduced by the court. No applicant may be denied counsel based upon failure or inability to pay this fee. See ORC 120.36 (B).

IX. Affidavit of Indigency

Here, the applicant must swear to the truth of the information contained in this form, and this section must be signed by the applicant and witnessed by a person authorized to give an oath (e.g. notary public, clerk of court, etc.). The person witnessing should complete the "Title" line of this section with the authority by which that person can administer an oath, which will not necessarily be the same as that person's job title.

X. Judge Certification

If the applicant is unable to complete this form (e.g. minor, incarcerated person, etc.), in this section, the judge may determine the applicant is eligible for court-appointed counsel and should provide a brief description of why the applicant is unable to complete the form.

XI. Notice of Recoupment

This section provides notice to the applicant that if his or her gross monthly income falls at or above 125% of the federal poverty guidelines, he or she may be subject to recoupment. See ORC 120.03 (B)(6)–(8), OAC 120-1-05, and ORC 2941.51 (D).

Attorneys' fees and expenses cannot be taxed as part of the costs charged in a case. However, through recoupment, if the indigent client or juvenile's parent(s) has, or reasonably may be expected to have the means to pay some **part** of the costs of services rendered, the indigent client or juvenile's parent(s) can be required to pay the county an amount that person reasonably can be expected to pay. See <u>ORC 2941.51</u> (D).

XII. Juvenile's Parents' Income

If the respondent/defendant is a juvenile, complete this section with the income information of that juvenile's custodial parent(s). Because financial information was not collected about the parent(s) in Sections IV and V, information collected in this section is used to determine whether the parent(s) of the juvenile will be subject to recoupment.

- Compare the dollar amount in the box labeled Total Income in this section to OPD's Indigent Client Eligibility Guidelines. If the parents' Total Income falls below 125% of the federal poverty guidelines on this chart, they cannot be subject to recoupment. See OAC 120-1-03 (C)(1). If the parents' Total Income falls at or above 125%, they can be subject to recoupment. See OAC 120-1-03 (B).
- ➤ Because recoupment is limited to "an amount that the person reasonably can be expected to pay" (ORC 2941.51 (D)), you may choose to also collect information about the parents' monthly expenses in Section VI of this form.