

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT	REQUEST FOR COURT-APPOINTED ATTORNEY AND ORDER	CASE NO. and JUDGE
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ORI _____ Court address _____ Court telephone no. _____
MI- _____

<p>THE PEOPLE OF</p> <p><input type="checkbox"/> The State of Michigan</p> <p><input type="checkbox"/> _____</p>	v	<p>Defendant's name, address, and telephone no.</p> <p>_____</p> <p>_____</p> <p>_____</p>		
		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CTN _____</td> <td style="width: 50%;">SID _____</td> </tr> </table>	CTN _____	SID _____
CTN _____	SID _____			

REQUEST

The defendant requests a court-appointed attorney and submits the following information.

<p>1. CHARGE _____ <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Live with parents</p> <p>_____ <input type="checkbox"/> Felony <input type="checkbox"/> Room/Board</p> <p>Next hearing: _____ <input type="checkbox"/> Paternity</p> <p style="padding-left: 40px;">Date</p> <p>Bail amount: \$ _____ <input type="checkbox"/> Bond Posted</p>	<p>2. RESIDENCE</p> <p><input type="checkbox"/> Rent <input type="checkbox"/> Own <input type="checkbox"/> Live with parents</p> <p><input type="checkbox"/> Room/Board</p>
	<p>3. MARITAL STATUS</p> <p><input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Dependents: _____</p> <p><input type="checkbox"/> Married <input type="checkbox"/> Separated Number</p>
<p>4. INCOME Employer name and address _____ Length of employment _____</p> <p>Average take-home pay \$ _____</p> <p><input type="checkbox"/> weekly <input type="checkbox"/> monthly <input type="checkbox"/> every two weeks</p>	
<p>Other Income State monthly amount and source (MDHHS, VA, rent, pensions, spouse, unemployment, etc.).</p> <p>_____</p>	
<p>5. ASSETS* State value of car, home, bank deposits, inmate accounts, bonds, stocks, etc.</p> <p>_____</p>	
<p>6. OBLIGATIONS* Itemize monthly rent, installment payments, mortgage payments, child support, etc.</p> <p>_____</p>	
<p>7. CONTRIBUTION TOWARD ATTORNEY COSTS</p> <p>I understand that I may be required to contribute to the cost of an attorney.</p> <p>Date: _____ Signature: _____</p> <p>E-mail address: _____</p>	

*Use other side for additional information/comments.

ORDER

8. _____ is appointed to represent the defendant.

Name Bar no.

9. The petition is denied because:

Judge signature and date