
Name (and any aliases)

Address

City, State, Zip

Phone

Email

Check your email. You will receive information and documents at this email address.

KANE COUNTY JUSTICE COURT State of Utah
76 North Main Street
Kanab, UT 84741
(435) 644-2351 – telephone; (435) 644-4907 – fax
jckane@utcourts.gov

<p>_____ Plaintiff</p> <p>v.</p> <p>_____ Defendant</p>	<p>Declaration of Financial Status (Criminal) (Utah Code 78B-22-201.5)</p> <p>_____ Case Number</p> <p>_____ Judge</p>
-----------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------

I request a court appointed lawyer. My date of birth is _____.

Dependents													
Your marital status:	Single [] Married [] Widowed [] Divorced []												
Total number of dependents/ children: _____	For each person you are legally required to support, list their age and your relationship to them: <table border="1" style="width: 100%;"><thead><tr><th>Age</th><th>Relationship</th></tr></thead><tbody><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></tbody></table>	Age	Relationship										
Age	Relationship												

Income			
Employment	Are you employed: YES [] NO [] Self-employed [] Employer: _____ Hourly rate: _____ Full time [] Part time [] Average hours per week: _____		
Spouse	If married, is your spouse employed: YES [] NO [] Employer: _____ Hourly rate: _____ Full time [] Part time [] Average hours per week: _____		
Other income If not employed, do you have income from another source?	Retirement \$		
	Alimony \$		
	Child support \$		
	SSI/Disability \$		
	Public assistance (not including food stamps) \$		
	Unemployment \$		
	Other \$		
Total Income:	Total pay from all sources during the last 6 months \$		
Assets			
(In any location/state)	Total cash (savings or checking) \$		
	Total value of land, house(s), or real property in your name (include assets held for your benefit) \$		
	Total market value of vehicles Make/Model \$		
	Total retirement accounts \$		
	Stocks, bonds, notes \$		
	Any other items (list) \$		
Total Assets:	\$		
Debts			
Creditors (to whom you owe money)	Total owed:	Monthly payment:	Collateral (auto, house, etc.)
	\$	\$	
	\$	\$	

	\$	\$	
Monthly Expenses			
	Housing	\$	
	Food	\$	
	Utilities	\$	
	Transportation	\$	
	Debt payments	\$	
	Medical	\$	
	School	\$	
	Clothing	\$	
	Necessities (list)	\$	
	Child support	\$	
	Alimony	\$	
	Other (include fines, fees, or restitution you are required to pay)	\$	
	Attorney fees you are required to pay from other cases	\$	
Total Expenses		\$	

I have these extraordinary financial conditions that prevent me from hiring a private lawyer (explain):

I may be subject to criminal penalties for making any false statements in this declaration. I authorize the government agency that is responsible for providing lawyers to people who cannot pay in criminal cases to contact me or request information from me or a third party to verify whether I can afford a private lawyer. I may be ordered to pay the cost of my court appointed lawyer if the court later determines that I am able to pay. I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at _____ (city, and state or country).

_____ Date

Signature ► _____

Printed Name _____