

MONTGOMERY COUNTY PUBLIC DEFENDER'S OFFICE

P.O. Box 338, 200 Clark Dr., Fultonville, NY 12072

Phone: 518-853-8305 / Fax: 518-853-8308

From Montgomery County Correctional Facility 853-8306

FINANCIAL AFFIDAVIT – Family / IDV Court

NOTICE TO APPLICANT:

1. You have the right to be represented by counsel in this proceeding if you qualify.
2. Please **COMPLETE** this Affidavit and return promptly to the Public Defender's Office. **Answer ALL questions** to the best of your ability. Do not leave any questions unanswered.
3. If you are under 21 and living with your parents or legal guardian, they are required to give their financial information, number of dependents and list of assets, along with yours.

If application is not completed with EVERY question thoroughly answered, it will be RETURNED to you UNPROCESSED.

APPLICANT INFORMATION

1. Your Full Name _____ Date: _____
2. Other names that you are or have been known by _____
3. Home Mailing Address _____
Note: You must notify the Public Defender's Office of any address and/or phone change.
4. Date of Birth _____ Gender ☐ male ☐ female Social Security # _____
5. Phone _____ Secondary No(s). _____
6. If you are under 21, are you living with parent or legal guardian? _____ Name(s) _____
7. Marital Status: Married/Single/Divorced/Separated/Widowed Spouse's Full Name _____
8. How many biological children do you have? _____ Name _____ Age _____
Number of additional children legally _____
adopted or you have legal custody of _____
9. Number of biological, adopted and/or legal custody children residing with you (under 21) _____
10. Do you *currently* pay support for these children? _____ How often _____ Amount \$ _____
11. If there is a Court Support Order in place, please indicate Court _____
12. Are you *currently* receiving support? _____ How often _____ Amount \$ _____
13. Number of dependents under 21 being claimed _____

COURT INFORMATION

Note: Please attach copy of adjournment slip with this application.

1. Next court date: _____ Time: _____ Are you the: ☐ Petitioner, ☐ Respondent or ☐ Both?
2. File No(s): _____ Family Court Docket No.: _____
3. Type of Petition filed: _____ 1st Initial Court Appearance Date on *this* petition: _____
4. Name of any other persons named in Family Court Petition: _____
5. Are there any current **Criminal** charges against you (please list): _____
6. Date of arrest: _____ Is this a Felony? ☐ yes ☐ no Attorney representing: _____
7. Court and Judge: _____ Are you currently in jail? ☐ yes ☐ no Bail amount: _____
8. Name of any Co. Defendant's involved: _____

PLEASE COMPLETE BOTH SIDES OF FINANCIAL AFFIDAVIT

EMPLOYMENT INFORMATION (The following questions are in regard to **you and/or anyone in your home**)

1. What is your occupation? _____
2. Name/Address of Employer _____
3. Length of Employment _____
4. Hourly rate of pay \$ _____ [] Full-time [] Part-time Number of hours a wk. _____
5. Amount of pay before taxes \$ _____ [] Weekly [] Bi-wkly [] Monthly [] Yearly
6. If you are receiving **or plan to receive, please circle & indicate details:** Heap, Hudd, Housing, Food Stamps, Unemployment, SSI, SSD, Workman's Comp., DSI, Pension, Support, Trust Fund, SNAP, TANF, PA, Survivor Benefits etc., other: _____
7. How much \$ _____ How often _____ Other? _____
8. If you are **unemployed and not receiving any assistance**, indicate how you are meeting your living expenses: _____

SECONDARY INCOME (spouse, partner with child in common, legal guardian, parents, child income/assistance, etc.)

1. Source of income _____
2. Amount of pay (before taxes) **or** assistance received \$ _____ [] Weekly [] Bi-wkly [] Monthly

ASSETS Do you own any of the following? **CHECK BOX**

House [] yes [] no Market Value \$ _____ Total balance owed on mortgage \$ _____
Property [] yes [] no Value \$ _____ Stocks/bond/CD's/trust fund [] yes [] no Value \$ _____
Vehicle [] yes [] no Value \$ _____ Year & Make _____
Amount in Checking \$ _____ Amount in Savings \$ _____ Amount on hand \$ _____
Name of bank and location _____

DEBTS Rent/Mortgage \$ _____

CRIMINAL HISTORY

1. Have you ever been *Convicted of*: [] Felony, [] Misdemeanor, [] Violation Year _____
2. Have you ever been legally classified a person (adult or child) in need of supervision or as a juvenile delinquent? _____
3. Have you ever been represented by this office before? [] yes [] no Year _____ Charge/Attorney _____
4. Do you have any other pending cases? [] yes [] no Court/Attorney _____
5. Do you have any lawsuits currently pending? [] yes [] no Court/Attorney _____
6. Are you on Probation? [] yes [] no Parole? [] yes [] no Through which Court/Judge: _____

NOTICE:

I, _____, being duly sworn, depose and say that I am the _____ in the above - entitled case, and I am financially unable to retain an attorney to represent me in regard to the above matter. In the event that I become employed or retain my own attorney I will notify the Court as soon as possible and I will immediately notify the Public Defender's Office with the name/address of my employer. I have examined the above statements made by me, and to the best of my knowledge and belief, they are true and correct.

I, _____, hereby authorize any bank, place of employment or other financial institution or Credit Bureau to disclose confidential information concerning bank accounts, payroll, and other assets or credit information to the Montgomery County Public Defender's Office.

Subscribed and sworn to before me
this _____ day of _____, 20____.

Signature of Applicant(must sign before Notary w/notary stamp)

Notary Public



BE SURE that you answered EVERY QUESTION COMPLETELY or it will be **RETURNED to you UNPROCESSED**.

Form update: 11/3/17

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