|  |  |  |  |
| --- | --- | --- | --- |
| **JDF 208** | **Application for a State Paid Professional** (ACTA) | | |
| A drawing of a person  Description automatically generated | County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Division: \_\_\_\_\_\_ | Court Use Only |
| Case Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Courtroom: \_\_\_\_ |

Because I (or they) can’t afford one, I would like the court to provide a state paid:

Lawyer  *Guardian ad litem*  Court Visitor  Child & Family Investigator

For:  Me/My Case or  Another Party. *(Fill in* ***their information*** *in sections 2-8 below.)*

**1. I understand**

* I must fill in **all** blanks. Write “**No**” or “**None**” if a blank doesn’t apply.
* The court may charge a $25 processing fee at the end of the case.
* I/They may have to repay the state for the professional’s fees.

**2. Basic Information**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: *(if different) \_\_\_\_\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. Work Information**

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Length of Employment: \_\_\_\_\_\_\_\_\_\_\_\_

Pay Date(s): \_\_\_\_\_\_\_\_\_\_\_\_\_ Hours/Week: \_\_\_\_\_\_\_\_ Pay Rate: $ \_\_\_\_\_\_\_\_\_\_\_

**4. Case Information**

Next hearing: *(type and date)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Most serious charge: *(criminal cases only)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5.** **Household Members**

Status:  Single  Married or Civil Union Partnered

Separated  Divorced

Number of dependents: *(including yourself)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

*Note - Don’t list roommates. Only list household members who contribute income to the common support of the home.*

|  |  |  |
| --- | --- | --- |
| **Name** | **Relationship** | **Income Before Taxes** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**6. Monthly Income & Expenses**

|  |  |  |  |
| --- | --- | --- | --- |
| Income Before Taxes | $ | Expenses | $ |
| Mine *(wages/salary/commission/tips)* | $ \_\_\_\_\_\_ | Rent/Mortgage | $ \_\_\_\_\_\_ |
| Household Members | $ \_\_\_\_\_\_ | Groceries | $ \_\_\_\_\_\_ |
| Parents *(if same household)* | $ \_\_\_\_\_\_ | Utilities | $ \_\_\_\_\_\_ |
| Unemployment Benefits | $ \_\_\_\_\_\_ | Clothing | $ \_\_\_\_\_\_ |
| Social Security/Retirement | $ \_\_\_\_\_\_ | Maintenance/Child Support | $ \_\_\_\_\_\_ |
| Maintenance *(alimony)* | $ \_\_\_\_\_\_ | Medical/Dental | $ \_\_\_\_\_\_ |
| Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_ | Transportation | $ \_\_\_\_\_\_ |
| Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_ | Loans/Credit Cards | $ \_\_\_\_\_\_ |
| Total Household Income | $ \_\_\_\_\_\_\_ | **Total Expenses** | $ \_\_\_\_\_\_\_ |

**7. What is Owned**

|  |  |  |  |
| --- | --- | --- | --- |
| **Asset** | **$**  **Value** | **Description of Asset** | **$ Still Owed** |
| Savings Account | $ \_\_\_\_\_\_\_ | Bank Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| Checking Account | $ \_\_\_\_\_\_\_ | Bank Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| Vehicle | $ \_\_\_\_\_\_\_ | Year & Model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_ |
| Vehicle | $ \_\_\_\_\_\_\_ | Year & Model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_ |
| House | $ \_\_\_\_\_\_\_ | Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_ |
| Other Property | $ \_\_\_\_\_\_\_ | Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_ |
| Stocks, Bonds, and Mutual Funds | $ \_\_\_\_\_\_\_ | Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| Other Investments | $ \_\_\_\_\_\_\_ | Type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | $ \_\_\_\_\_\_ |
| **Total Assets** | $ \_\_\_\_\_\_\_\_ | **Convertible to Cash** | $ \_\_\_\_\_\_\_ |

**8. References**

1) Name/Phone/Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2) Name/Phone/Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**9. Sign & Date**

I swear that the information contained above is true and complete.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Print Your Name Your Signature Date

|  |
| --- |
| **Staff Use Only:** |
| Above Guidelines  At or Below Guidelines  Staff Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Request Granted  Request Denied  Judicial Officer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Instructions**

**1. Income Before Taxes**

Includes income from household members who contribute to the common support of the home.

**Include:**

• Wages

• Tips

• Salaries

• Bonuses

• Alimony

• Pensions

• Royalties

• Annuities

• Dividends

• Commissions

• Capital Gains

• Severance Pay

• Trust Income

• Retirement Benefits

• Unemployment Benefits

• Independent Contractor Pay

• Social Security Disability (SSD)

• Social Sec. Supplemental Income (SSI)

• Interest/Investment Earnings

• Worker’s Compensation Benefits

**Note**: Don’t include income from **roommates**. Only include their incomes if you share bank accounts or commingle funds.

**Do Not Include:**

• Food Stamps

• Child Support

• Public Assistance

• TANF Payments

• Subsidized Housing

• Veteran’s Disability

**2. Liquid Assets/ Convertible to Cash**

Includes cash on hand or in accounts, stocks, bonds, certificates of deposit, and equity.

This also includes personal property or investments that could be converted into cash without risking your ability to maintain a home and employment.

**3. Expenses**

**Do not include** nonessential items such as cable, streaming services, club memberships, entertainment, dining out, alcohol, cigarettes, etc. Allowable expense categories are listed on the form.

**4. Attach**

You may have to provide the three previous month’s bank statements and proof of income (like pay stubs). Don’t attach original documents. You may wish to remove financial account and tax identification numbers.