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**IN THE NISQUALLY TRIBAL COURT
NISQUALLY INDIAN RESERVATION
OLYMPIA, WASHINGTON**

NISQUALLY INDIAN TRIBE,

Plaintiff,

v.

Defendant.

Case No. _____

**AFFIDAVIT OF ELIGIBILITY
AND REQUEST FOR
COURT APPOINTED COUNSEL**

I am requesting appointment of counsel in this case because I cannot pay for an attorney without causing substantial hardship to myself or to my dependent family. The following information is complete and accurate to the best of my knowledge and I acknowledge that I may be required to verify this information. I understand that incorrect information can result in the denial of my request or the withdrawal of counsel if already appointed and that I may be charged with a crime and incarcerated if convicted.

1. Personal

- a. I am a member of _____ a federally recognized Indian Tribe.
- b. Address: _____
Telephone No.: (____) _____
- c. DOB: _____
- d. Social Security No.: _____
- e. Gender: ___Male ___Female
- f. Marital Status: ___Married ___Single ___Separated ___Divorced
- g. **Number of Dependents** (including applicant): _____



1 **2. EMPLOYMENT AND INCOME**

2 a. Present Employer: _____

3 Address/Phone No.: _____

4 b. Hourly wage \$ _____ Hours per Week: _____

5 c. **Net Monthly Income:** \$ _____

6 d. **Other Income** for you, spouse, dependents or household members; such as
7 employment of spouse/household members, Social Security, Tribal Per Capita or
8 Bonus, Fish/Shellfish, interest, dividends, unemployment, retirement, public
9 assistance, child support, GA/TANF, etc:

Source of Income Who Receives	How Long Received	How Often Received	Amount
			\$
			\$
			\$
			\$

14 **3. PROPERTY/ASSETS OWNED BY YOU, SPOUSE AND DEPENDENTS**

15 a. Cash \$ _____

16 b. Credit Cards: Balance: \$ _____ Monthly Payments \$ _____

17 c. Motor Vehicle:

Make, Year	Value	Amount Owed	Payments
	\$	\$	\$
	\$	\$	\$

22 d. Real Estate:

Address	Value	Amount Owed	Payments
	\$	\$	\$
	\$	\$	\$



e. All Other Property or Assets: (Such as boats, jewelry, guns, tools, etc.)

Description	Value	Description	Value
	\$		\$
	\$		\$
	\$		\$

4. **MONTHLY EXPENSES** (List all other expenses paid monthly by you individually or jointly with your spouse or other members of the household)

Rent	\$	Utilities	\$
Clothing	\$	Health Care	\$
Child Care	\$	Child Support	\$
Insurance	\$	Transportation	\$
Court Ordered Fines/Fees	\$		
Other (Specify):	\$		

5. **FEE**

- a. I understand that if I receive the services of a Court Appointed Attorney, unless I ask for and receive a waiver of the fee from the court, I will be required to pay a contribution amount of **\$150 - 500.00** before I am assigned Counsel and that this fee covers only services for the above-captioned case.
- b. I further understand that if I choose to appeal the Tribal Court decision an additional fee may be imposed by the Court if I request and am eligible for Court Appointed Appellate Counsel.

6. **NISQUALLY TRIBAL MEMBERS** (CHECK IF APPLY)

_____ I am a Nisqually Tribal Member and have attached my verification of enrollment. I am applying to the Tribal Court Assistance Program for Tribal Members to see if I qualify for some financial assistance for the Court Appointed Attorney.



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7. ACKNOWLEDGEMENT

I certify and affirm that I have read the information contained in this form, personally completed this application or requested its completion and that all statements contained herein are true and complete. I understand that I may be required to provide documentation of income/debts and or to sign a Release of Information form before a decision is made if the judge so requests.

Signed this _____ day of _____, 200__.

Signature of Applicant

Subscribed and Sworn to before me this _____ day of _____, 200__.

Notary Public
In and for the State of Washington
My Commission Expires on: _____



1
2 1. Defendant's Request for a Court Appointed Attorney is

3 Granted

4 One-Time fee is \$_____

5 Fee must be paid prior to assigning Attorney.

6 Fee Due by: _____

7 Fee is waived by the court

8 Denied Defendant is

9 _____ Over-Income

10 _____ Request Denied on: _____

11 Defendant failed to respond to requested information.

12 _____ Other: _____

13 Pending (Need more information)

14 Notice On: _____

15 Requesting Information: _____

16 Court Administrator: _____

17 2. Defendants request for a waiver or reduction of the Fee is:

18 Granted

19 Granted in part – a reduction of the fee is allowed and the fee is \$_____

20 Fee due by: _____

21 Request Denied

22 3. Comments/Remarks: _____

23 _____
24 Dated: _____

25 _____
26 Judicial Services Director

