

CLERK OF THE CRIMINAL, GENERAL SESSIONS-CRIMINAL & FOURTH CIRCUTT COURT



KNOX COUNTY CRIMINAL COURT COMMUNITY SERVICE PROGRAM AFFIDAVIT OF INDIGENCE

KNOXVILLE, TENNESSEE

STATE OF TENNESSEE

CASE/DOCKET NO.

vs.

DEFENDENT

Comes the defendant and, subject to the penalty of perjury, makes oath of the following facts (Please list, circle, complete, etc.)

- 1. Full Name:
- 2. List any other names ever used:

3.	Birthdate:		Gende	er:	Male		Female	
4.	Address:							
5.	Telephone No(s): (Home)	(Wo	ork)		(Mobile)			
6.	Are you currently employed?	Yes	No	lf yes, \	Where?			
7.	How much money do you make? \$			Per ho	ur/day/w	/eek/m	onth/yea	ar
				(Circle	One)			
8.	Do you have any income other than the income listed above?							
9.	If yes, list the total amount:\$	(w	weekly, monthly, etc.) List Source of Income(s):					
	Remember, possible sources include, but are not limited to the following: interest, gifts,					S,		
	AFCD, SSI, social security, retirement, disability, pension, unemployment, alimony, and					d		
	workers' compensation.							
10.	10. Do you hold a HMIS (Homeless Management Information System) Card? Yes No							
11.	11. What is your total income after taxes \$							
12.	12. Your last income tax return filed was in the year:							
13.	13. Can you provide your last filed federal income tax return? Yes No							
14.	14. Your last return reflected an adjust gross income of \$							
15.	15. If you are unable to provide you last federal income return filed, can you provide the last							
	paystub you received? Yes		No					
								;

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16. Do you own property? Yes No

17. List all vehicles/vessels/real estate owned by me, solely or jointly, including, but not limited to: cars, trucks, motorcycles, farm equipment, boats, land, lots, houses, mobile homes, etc.

Description:	Value \$	Owned:	Amt. Owed:
Description:			

18. Other property valued over \$1,000:

19. All money available to me from any source:

Cash:

Checking, Savings, or CD Account(s) Balance: Debts owed to me:

Credit Card(s) (Visa/MasterCard/American Express/Other):

Account No.:	Balance:	Credit Limit:
Account No.:	Balance:	Credit Limit:
Account No.:	Balance:	Credit Limit:

20. Number of persons in your family/household:

21. Name and ages of all dependents:

Name:	Age:	Relationship:
Name:	Age:	Relationship:

22. My expenses per month are:

Rent/House Payment:	Groceries:
Electricity:	School Supplies:
Water:	Clothing:
Home Gas:	Medical & Dental:
Transportation:	Child Care:
Court Ordered Child Support:	Other:

23. Which legal representation listed below was used for your most recent offense?

	Pro se (Represented Self)	Court Appointed Attorney	Paid for Attorney	
24.	Do you have any construction, carpentry, or specific trade skills?			No
	If yes, please describe:			
~-				

25. Are you physically able to lift a minimum of 25 lbs.? Yes No

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criminalcourt.knoxcounty.org/

(865) 215-4087– Direct Elizabeth.White@knoxcounty.org





Acknowledging that I am still under oath, I certify I completed the above Affidavit truthfully, listing all assets in which I hold or expect to hold any legal or equitable interest.

I am financially unable to pay all fines and court costs.

I understand that it is a Class A Misdemeanor for which I can be sentenced to jail for up to 11 months and 29 days or be fined up to \$2500.00 or both if I intentionally or knowingly misrepresent, falsify, or withhold any information required in the affidavit. I also understand that I may be required by the Court to produce other information in support of my request to participate in the Knox County Court Community Service Program.

This day of , 20 .

APPLICANT

Sworn to and subscribed before me. This day of, 20Notary Public:

My Commission Expires:

Reserved for Notary Seal

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