



COUNTY OF SACRAMENTO
Public Safety and Justice
Conflict Criminal Defenders

Theresa Huff
Executive Director

PEOPLE OF THE STATE OF CALIFORNIA	
VS	
Defendant	Case Number

DEFENDANT'S STATEMENT OF INCOME AND EXPENSES

(Attach additional sheets if the space provided below for any item is not sufficient)

PERSONAL INFORMATION	
1. a. Name	b. Marital Status
c. Social Security Number	d. Home Address
EMPLOYMENT	
2. What are your sources of income and your occupation? <i>(Provide Job Title and name of division or office in which you work)</i>	
3. Name, Address and Telephone of your business or employer <i>(Include address of your payroll or human resources department, if different)</i>	
4. How often are you paid? <i>Weekly, Bi-Weekly, Monthly</i>	
5. What is your gross pay for each payroll period?	
6. What is your net pay (take home) for each payroll period?	
7. If your spouse earns any income, give name of spouse, name & address of business or employer, job title and division or office:	
8. Other sources of Income <i>(Specify type and amounts):</i>	

CASH, BANK BALANCES

9. How much money do you have in Cash?

10. How much Money do you have in Banks, Saving and Loans, Credit Unions and other financial institutions, either in your name or jointly? *Please list below.*

Name and Address of Financial Institution	Account Number	Individual or Joint?	Balance
a.			
b.			
c.			

VEHICLES

11. List all Automobiles, Boats and other motor vehicles owned in your name or jointly: *Please list below.*

Year, Make & Model	Value	Legal Owner (if different than registered owner)	Amount Owed

REAL ESTATE

12. List all Real Estate owned in your name or jointly. *Please list below.*

Address of Real Estate	Current Market Value	Lien Holder (Name and address)	Amount Owed
a.			
b.			
c.			

OTHER PERSONAL PROPERTY

13. List any personal property of value not listed above, either owned in your name or jointly. ***(Do not list household furniture, appliances or clothing.)***

Description	Value	Address where property is located.
a.		
b.		
c.		

ASSETS

14. List all other assets, including Stocks, Bonds, Mutual Funds, and other securities and retirement accounts (*specify*):

15. Is anyone holding assets for you?

Yes No (*If yes, describe assets and give name and address of person or entity holding each asset.*)

ASSETS (Cont.)

16. Except for attorney fees in this matter and ordinary and routine household expenses, have you disposed of or transferred any assets since your arrest on this matter?
 ___ Yes ___ No (If yes, give name and address of person or entity receiving each asset and a description of the asset).

DEBTS

Please provide details if any of the following are applicable:	Amount
17. Loans:	
18. Taxes:	
19. Support Payments (attach copies of orders and statements):	
20. Other Debts:	

MONTHLY EXPENSES

Description of Expense	Amount
21. Mortgage/Rent Payments (Specify landlord name and address or Lien Holder name and address):	
22. Unreimbursable Medical or Dental Expenses:	
23. Child Care:	
24. Childrens Education:	
25. Food and Household supplies:	
26. Food, Restaurants	
27. Utilities:	
28. Telephone:	
29. Laundry & Cleaning	
30. Clothing	
31. Education (specify):	
32. Entertainment:	
33. Other (specify):	
34. Attorney Fees: a. To date, I have paid my attorney for fees and costs totaling (specify source):	
b. To date, I owe the following fees and costs over the amount paid:	
c. My arrangement for attorney fees and costs is (specify and attach retainer agreement):	

DECLARATION

I, _____ declare under penalty of perjury that the foregoing is
 (Client name)
true and correct.

(Date)

(Signature of Client)

To the best of my information and belief, the foregoing is true and correct.

(Date)

(Signature of Attorney)

(Type or print name of attorney)