

Form 7-2308: Financial Affidavit and Application for Counsel

How much have you made in the last 12 months from **any** source, before taxes or deductions: _____

Do you **pay** Child or Spousal Support? YES NO

If yes, how much? _____ per week/month

Do you **receive** Child or Spousal Support? YES NO

If yes, how much? _____ per week/month

Per Capita Received: _____ per month / quarter / other time period: _____

From Tribe: _____

Who do you all receive Per Capita for (including yourself)? _____

How many people are supported by or live with you? _____

Is your household a: Single Family OR Multi-Family

Do you receive Social Security/Unemployment? YES NO

If yes, how much? _____ per week/month

List all other money you may have coming in (All sources of Public Assistance, ADC, Heating Assistance, Food Stamps, etc): _____.

Does any person pay all or any portion of your current expenses? YES NO

If yes, who pays these costs and how much? _____.

2026 POVERTY GUIDELINES		Pursuant to Section 7-2308 of the Tribal Code, all orders for appointment of attorneys at the Tribe's expense shall require the person receiving such funds to perform at least THREE HOURS of community services to the Tribe for EACH HOUR of attorney or advocate time billed to the Tribe , except that the Court need not require community service where the Court finds that the party is not physically able to perform such services or where the performance of such services would impede reunification of the family. The Court, may, in its discretion, condition the appointment of counsel upon the indigent party first having completed some or all of the community service hours.
Persons in family/household	Poverty guideline	
1	\$15,960	
2	\$21,640	
3	\$27,320	
4	\$33,000	
5	\$38,680	
6	\$44,360	
7	\$50,040	
8	\$55,720	
For families/households with more than 8 persons, add \$5,680 for each additional person.		

Form 7-2308: Financial Affidavit and Application for Counsel

Do you believe that your family income is below the Federal Poverty guidelines (*See chart on previous page*) for your size of family? YES NO

Should these guidelines be deviated from? YES NO

If yes, please explain why: _____
_____.

****PLEASE WAIT TO SIGN & DATE UNTIL IN FRONT OF A NOTARY****

Signature

Date

Signed before me on ____ day of _____, 20____.

 Signature of Notary Public, State of _____

Tribal Court Staff Title: _____

ISSUED STAMP

****AREA BELOW FOR JUDGE ONLY****

Application **APPROVED**

Assigned to: _____

Phone Number: _____

Application **DENIED**

Reason: _____.

Date: _____

By Judge: _____