

DISTRICT COURT TRUSTEE  
**APPLICATION FOR COURT APPOINTED ATTORNEY**

*Not eligible*

PETITIONER KIMBRA PHILLIPS  
 and CASE NO. 07CV3318

RESPONDENT DANIEL PHILLIPS

YOUR NAME PHILLIPS DANIEL D  
LAST FIRST MI.

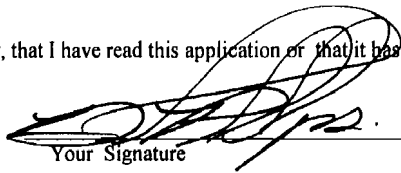
ADDRESS [REDACTED] SHAWNEE KS 66203  
STREET CITY STATE ZIP

913 [REDACTED]  
 DAY TIME PHONE NO.

I N C O M E	<b>EMPLOYMENT:</b> Are you (check one): <input checked="" type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Self-Employed Complete the information below for the last 12 months. Employer: <u>VINYL RENAISSANCE</u> Address: <u>10922 SHAWNEE MISSION PKWAY</u> Date of Employment: <u>3/05</u>	Monthly Income _____ _____ _____ If living with your parents or others to whom you look for support, enter their monthly income..... TOTALS \$ <u>4600.00</u> ESTIMATED ANNUAL INCOME \$ <u>55,200</u> X12
	<b>OTHER INCOME:</b> Have you received within the past 12 months any other income, including from a business, rent payments, public assistance, support or other sources <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, give the amount received and identify sources _____ (Attach additional sheets, if necessary)	\$ _____ TOTAL ANNUAL INCOME \$ _____ (A)
O T H E R	<b>CASH:</b> Have you any available cash or money in savings or checking accounts, certificates of deposit or other funds? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$ _____ (B)
	<b>PROPERTY:</b> Do you own a home, land or property? (Do not include ordinary household furnishings and clothing) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  If yes, approximately how much is it worth? <u>\$ 160,000</u> Less amount still owed on it, approximately <u>\$ 160,000</u>	\$ _____ (C) TOTAL LIQUID ASSETS (A+B+C=D) \$ _____ (D)
D E B T S	<b>DEPENDENTS:</b> Total No. Dependents _____ Check one: <input type="checkbox"/> Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Separated/Divorced List names, ages and relationship _____	<b>DEBTS/MONTHLY BILLS</b> Rent/House Payment \$ <u>1600</u> Food/Clothing/Medicine \$ <u>1100</u> Utilities \$ <u>625.00</u> Child Support/Maintenance \$ _____ Installment Payments \$ <u>800.00</u> Other Payments \$ <u>405</u> <b>TOTAL MONTHLY EXPENSES</b> \$ <u>4630.00</u>

I declare that I am of lawful age and under penalty of perjury, that I have read this application or that it has been read to me, about my financial condition, and that the statements contained herein are true.

Date Aug 18, 2009

  
 Your Signature

**RETURN THIS APPLICATION TO THE HEARING OFFICER, OFFICE CLERK OF DISTRICT COURT**  
 JOHNSON COUNTY COURTHOUSE, 100 N. KANSAS AVE., ROOM 935 JOHNSON COUNTY, KS  
 OR P. O. BOX 760, OLATHE, KANSAS 66051 *jm*

2009 AUG 24 AM 8:39

2009/08/26 14:27

The United States Court of Appeals, Tenth Circuit, determined in the case of Walker v. McLain, 768. F.2nd 1181 (1985) that counsel must be appointed to represent indigent obligors in non-support actions when incarceration is threatened. This appointment is for representation in this matter only. When that civil contempt for non-support is no longer requested or threatened, the appointment is ended, and shall be so noted by the Hearing Officer or presiding judicial officer.

**DETERMINATION OF ELIGIBILITY** - "AN ELIGIBLE INDIGENT DEFENDANT IS A PERSON WHOSE COMBINED HOUSEHOLD INCOME AND LIQUID ASSETS EQUAL LESS THAN THE SUM OF THE DEFENDANT'S REASONABLE AND NECESSARY LIVING EXPENSES PLUS THE ANTICIPATED COST OF PRIVATE LEGAL REPRESENTATION."

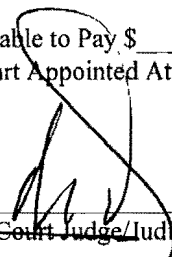
TABLE E		TABLE F	
Reasonable and Necessary Living Expenses		Costs of Legal Representation	
Size of family unit	Amount allowed	Most serious offense - severity level	Cost
1 .....	\$ 9,338	1-2 .....	\$ 9,000
2 .....	12,538	3-4 .....	3,500
3 .....	15,738	5-6 .....	2,000
4 .....	18,938	7-8 .....	1,800
5 .....	22,138	9-10 .....	1,500
6 .....	25,338	others	500
7 .....	31,738		
(Add \$3200 for each additional family member)			
Total Liquid Assets (Line D from front) _____		(1)	
Amount from Table E above _____		(2)	
Amount from Table F above _____			
Sum of E and F _____			
<p>If applicant's Total Liquid Assets (line 1) are less than the amount on (line 2), applicant should be determined to be indigent.</p> <p>In all other cases, applicant may be determined to be indigent or partially indigent, if partially indigent, applicant should be ordered to reimburse state for all or part of the expenditures made on his or her behalf. The Court may take into account unusual debts or other circumstances in determining eligibility for defense services.</p>			

RECOMMENDATION TO THE COURT:

Eligible  
 Not Eligible

Partially Indigent, able to Pay \$ \_\_\_\_\_  
 per month for Court Appointed Attorney

8/21/09  
 \_\_\_\_\_  
 Date

  
 \_\_\_\_\_  
 District Court Judge/Judicial Officer