



COWETA JUDICIAL CIRCUIT PUBLIC DEFENDER OFFICE

Carroll 306 Tanner Street Carrollton, Georgia 30117 770-830-1323 FAX 770-830-0715	Coweta 8B Madison Street Newnan, Georgia 30263 770-254-2705 FAX 770-9732	Meriwether 126 North Court Square Greenville, Georgia 30222 706-672-6662 FAX 706-672-2541	Troup 114 Church Street LaGrange, Georgia 30240 706-883-3000 FAX 706-883-3004	Heard P.O. Box 396 Franklin, Georgia 30217 706-675-0228
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Gerald P. Word
Circuit Public Defender

I, _____ understand that as a client of the Georgia Public Defender's Office, I hold certain responsibilities. I further agree to comply with the following conditions.

1. I agree to pay a \$50.00 (fifty dollar) application fee payable to the Public Defender's Standard Council upon the submission of my application.
2. I agree to resubmit an application immediately upon being released from jail if my application was processed while I was incarcerated. No additional fee will be charged.
3. I further agree to notify the Public Defender's office if my financial status changes(including, but not limited to, employment status, welfare or social security benefits and disability income).
4. I understand that it is my responsibility to notify my Public Defender or his/her representative of any changes regarding my contact information such as my address and/or phone number.
5. I also understand that it is my responsibility to contact the Public Defender's Office prior to my scheduled arraignment date to confirm my court date, and keep in contact about other upcoming court appearances.
6. I can contact the Public Defender at 706-883-3000

I fully understand and accept the above responsibilities and by signing this form I am stating that I will comply with these condition

This the _____ day of _____, 20____.

Defendant's Signature

Sworn to and Subscribed before me
This the ____ day of _____, 20____

Notary Public