

## WARNING

**IF YOU GIVE FALSE INFORMATION ON THIS FORM, YOU ARE COMMITTING A CRIME,  
PUNISHABLE BY UP TO 180 DAYS IN JAIL AND/OR A \$1000.00 FINE.**

### **WARNING TO DEFENDANT** **READ CAREFULLY**

If you have told the court that you are having money problems and cannot pay the money you owe to get out of jail, to pay your fines, or to hire a lawyer, you must complete this form. Fill it out carefully and completely. Then sign your name at the end.

By signing this report, you promise and certify that the information you provide on this form about your income is true and correct. You must answer every question and fill in all the blanks accurately and truthfully!!! ***Putting false information in this report is a crime, punishable by up to 180 days in jail, a fine of up to \$1,000.00, or both!*** Ohio Revised Code § 1931.13.

This form will be reviewed for errors and discrepancies. ***If you spend more than your income, you will be asked to explain the difference. If the court discovers that you provided false or misleading information, you may be charged*** with the crime of providing false information.

By signing this report, you acknowledge and understand that the judge, probation officers, clerks, and other court officials will rely on your information in the performance of their official functions.

If you have any questions with regard to the questions on this report, please ask a probation officer or bailiff.

**SHAKER HEIGHTS MUNICIPAL COURT  
PRISONER INFORMATION FORM**

**I. General Information**

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ SS# (last four only): XXX-XX-\_\_\_\_\_

Mailing address: \_\_\_\_\_

**Email:** \_\_\_\_\_

\*IMPORTANT\* All future correspondence from this Court will be sent to this email

Phone: ( ) \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

**Do you stay at this address?** Yes ( ) No ( ) If no, list address where you stay now: \_\_\_\_\_

\_\_\_\_\_ Phone # at this address \_\_\_\_\_

I [am] [am not] married. Number of children: \_\_\_\_\_

How many people live/stay with you? \_\_\_\_\_ **LIST THEIR NAMES BELOW:**

1. _____	<b>Relation</b> _____	<b>Age</b> _____	<b>Employed?</b> _____	<b>Yes ( ) No ( )</b>
2. _____	<b>Relation</b> _____	<b>Age</b> _____	<b>Employed?</b> _____	<b>Yes ( ) No ( )</b>
3. _____	<b>Relation</b> _____	<b>Age</b> _____	<b>Employed?</b> _____	<b>Yes ( ) No ( )</b>
4. _____	<b>Relation</b> _____	<b>Age</b> _____	<b>Employed?</b> _____	<b>Yes ( ) No ( )</b>

Number of people you pay for or support (Including yourself): \_\_\_\_\_

Are you under an order to pay child support or support to your wife? Yes ( ) No ( )

**II. Employment Information**

Are you employed? Yes ( ) No ( ) Are you self-employed? Yes ( ) No ( )

Name of the company where you work: \_\_\_\_\_

Job address: \_\_\_\_\_

Phone number where you can be reached at work: \_\_\_\_\_

How many hours per week do you work? \_\_\_\_\_

Shift hours \_\_\_\_\_ Position \_\_\_\_\_ Length of time at this job \_\_\_\_\_

I am paid (Circle One): [by the day] [by the week] [every two weeks] [once a month]  
[twice a month] [by the job]

Amount of take home pay per pay date: \_\_\_\_\_

If you are out of work now, where was your last job? \_\_\_\_\_

Why did you leave that job? \_\_\_\_\_

Does your spouse work? Yes ( ) No ( ) If yes, complete the following:

Place of work \_\_\_\_\_ Phone \_\_\_\_\_

Position \_\_\_\_\_ Length of time at this job \_\_\_\_\_

### III. Income Information

**EVERY MONTH, I receive** the following amounts of money:

Employment Income (take home pay) \_\_\_\_\_  
Spouse's Income (take home pay) \_\_\_\_\_  
Money from anyone else (parent, fiancé, etc.) \_\_\_\_\_  
Child support received \_\_\_\_\_  
Alimony received \_\_\_\_\_  
Social Security \_\_\_\_\_  
S.S.I. \_\_\_\_\_  
Unemployment \_\_\_\_\_  
Welfare \_\_\_\_\_  
Food Stamps \_\_\_\_\_  
Pension \_\_\_\_\_  
Worker's Compensation \_\_\_\_\_  
Disability \_\_\_\_\_  
Other (Describe) \_\_\_\_\_  
**Total monthly money received: \$** \_\_\_\_\_

### IV. Expense Information

**EVERY MONTH, I spend** the following amounts of money:

Rent/Mortgage \_\_\_\_\_  
Food \_\_\_\_\_  
Clothing \_\_\_\_\_  
Electric \_\_\_\_\_  
Gas/Heating Oil \_\_\_\_\_  
Telephone (cell phone and/or land line) \_\_\_\_\_  
Cable \_\_\_\_\_  
Water/Sewer (per month) \_\_\_\_\_  
Car Payments \_\_\_\_\_  
Other Loan Repayments \_\_\_\_\_  
Credit Card Payments \_\_\_\_\_  
Charge Card Payments \_\_\_\_\_  
Taxes \_\_\_\_\_  
Child Support Payments \_\_\_\_\_  
Alimony \_\_\_\_\_  
Healthcare (insurance and medical bills) \_\_\_\_\_  
Insurance of Car \_\_\_\_\_  
Other Insurance Payments \_\_\_\_\_  
Other (Jewelry, Boat, etc: Please Describe) \_\_\_\_\_  
**Total Month Money Spent: \$** \_\_\_\_\_

If you have no income, how are you buying food and paying bills? Is your family helping you? Please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**V. Assets/Property Owned**

Cash on Hand when arrested \_\_\_\_\_  
Cash Available to You \_\_\_\_\_  
Checking Account Balance \_\_\_\_\_  
Savings Account Balance \_\_\_\_\_  
Do you own (by yourself or with others) a residence?      **Yes ( )**      **No ( )**  
    Estimated Value of Residence      \$ \_\_\_\_\_  
Stocks/Bonds/CD's \_\_\_\_\_  
Do you own a car?      **Yes ( )**      **No ( )**      How much do you owe on the car?      \$ \_\_\_\_\_  
    If yes, list year, make and model      \_\_\_\_\_  
    Estimated Car Value      \$ \_\_\_\_\_  
Other Assets (describe) \_\_\_\_\_  
  
**Total Value of Assets:**      \$ \_\_\_\_\_

**Court Case Information**

Are you in jail for contempt of court?      Yes ( )      No ( )  
Do you have a case you failed to appear on      Yes ( )      No ( )  
    If yes, why didn't you appear? \_\_\_\_\_  
\_\_\_\_\_  
Were you on a payment Plan?      Yes ( )      No ( )      Did you get behind in payments?      Yes ( )      No ( )  
    If yes, why did you not pay? \_\_\_\_\_  
\_\_\_\_\_  
Were you doing community service?      Yes ( )      No ( )  
    If yes, did you fail to complete your service?      Yes ( )      No ( )  
    If yes, why did you fail to complete your community service? \_\_\_\_\_  
\_\_\_\_\_  
Why are you in trouble with the court (in contempt) now? \_\_\_\_\_  
\_\_\_\_\_  
Why haven't you made bond? \_\_\_\_\_  
\_\_\_\_\_  
How much can you pay today toward your court case if money is due? \_\_\_\_\_  
\_\_\_\_\_  
If your friends/family are trying to make your bond, when are they trying to come to court to post the money for you? \_\_\_\_\_  
Do you have health problems that would prevent you from doing community service? If so, describe \_\_\_\_\_  
\_\_\_\_\_  
Is there anything else that you want to tell the Judge or think that the Judge should know? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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**VI. Affidavit and Notification**

*Please read and sign the following:*

I, (print name) \_\_\_\_\_ certify that the information I have provided on this Prisoner Information form is true and correct. I understand that I am subject to criminal charges for giving false financial information, for which the court may impose a sentence of up to **180 days in jail** and/or a fine of up to **\$1,000.00**. I understand that this form will be used by the probation department, as well as the court in the performance of their official functions. I understand that I may speak with a jailer or probation officer if I have any questions about the content of this form.

**Affiant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**[STOP]**

***To be completed by Screening Agent/Witness:***

I certify that the above named affiant voluntarily signed this Prisoner Information form, and that I answered any questions the affiant had regarding the Prisoner Information form, or, in the event that I did not know the answer, directed the affiant's question to the appropriate personnel.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_