

Return completed form to: Dauphin County Bar Association Modest Means Panel, 213 N. Front St., Harrisburg, PA 17101 OR EMAIL: LRS@dcba-pa.org.. Questions? Call 717.232.7536, option 2.

Full name

_____ Number of adults in your household* (HH) _____ No. of children in HH _____ * Household includes people who live in the home with you and share income and expenses.

Address City/state/zip

Phone

Email ______ Alternate phone (anyone who can reach you)______

***Please attach proof of all household income below. Block out sensitive information such as your SSN or account numbers. Include your wages, benefits, and other income such as child support, self-employment, Social Security/SSDI, worker's compensation and veteran's benefits.

| Monthly GROSS Income | Self | Spouse/Significant | Other household | TOTAL |
|---|------------------|------------------------|------------------------------|------------|
| (<u>Before</u> Taxes Are Withheld) | | Other/Partner | members | |
| Wages / self-employment | | | | |
| Unemployment compensation | | | | |
| Child support / spousal support | | | | |
| Social security / welfare / veterans' benefits / | | | | |
| workers' compensation | | | | |
| Retirement / pension | | | | |
| Other (e.g., gifts, loans, eBay sales, odd jobs, | | | | |
| rental property) Source: | | | | |
| | | | | |
| TOTAL | | | | |
| ASSETS | | | | |
| *Please attach proof of all household assets below. | Block out sensit | ive information such a | <u>is your SSN or bank a</u> | ccount #s. |
| Checking / savings bank accounts | | | | |
| Stocks, bonds, or certificates of deposit | | | | |
| Retirement accounts | | | | |
| Investment accounts | | | | |
| TOTAL | | | | |
| REAL ESTATE (INCLUDING HOME YOU LIVE IN) | | | | |
| Estimated value (Zillow.com) | | | | |
| Loan balance due | | | | |

Issue (circle one): Bankruptcy, Consumer Protection, Contract Disputes, Criminal Misdemeanor, Custody (not including hearing / trial level), Debt Collection - Debtors, Divorce, Estate Planning & Probate, Foreclosure, Traffic Tickets, Support (appeals are NOT covered for any issue).

Brief description of legal problem

Opposing party's name ______ Name of opposing attorney (if any): ______

Court name/location (if known) _____ Deadlines / court dates? _____

Please list attorneys you have already contacted_____

Equity (= Value - Balance Due)

Submitting your application does NOT automatically make you a client, and does NOT create an attorney-client relationship between \checkmark you and DCBA, its employees, directors, officers, or members.

I certify that (1) I understand that submitting my application does not create an attorney-client relationship and (2) the information on this form is complete and correct to the best of my knowledge.

Dauphin County Bar Association Modest Means Referral Service Application

The Dauphin County Bar Association's (DCBA) Modest Means Program helps people whose income is too high to qualify for free legal services, but too low to pay a lawyer's regular rate.

When we receive your completed application and documentation, if you are eligible, we will try to refer you to an attorney who has agreed to consider certain cases at a reduced rate. However, **referrals are not always possible and are NOT guaranteed.**

If the attorney agrees to take your case and you want to hire that attorney, you agree to:

- 1. Give the attorney a retainer or deposit of **\$500 upfront** (The retainer amount may vary with the complexity of the case),
- 2. Pay the attorney at the rate of **\$50 per hour**, and
- 3. Pay any filing fees and other expenses (e.g., postage, copies of records, certified mail, etc.).

The Modest Means Referral Service accepts applications for legal help in these areas and only at the trial level (unless otherwise noted), **appeals are** <u>NOT</u> covered:

- ✓ Bankruptcy
- ✓ Consumer Protection
- ✓ Contract Disputes
- ✓ Criminal Misdemeanor
- ✓ Custody (<u>not</u> including Hearing or Trial Level), or

- ✓ Debt Collection Debtors
- ✓ Divorce
- ✓ Estate Planning & Probate
- ✓ Foreclosure
- ✓ Traffic Tickets
- ✓ Support

To apply

- **1**. Complete the application form.
- 2. Attach copies of your income and assets documentation. Include proof of all household wages, child support, and benefits such as Social Security, SSI, worker's compensation, unemployment or VA benefits and all household assets. Block out sensitive information such as your Social Security number or bank account numbers. YOUR APPLICATION WILL NOT BE REVIEWED UNTIL ALL PROOF OF INCOME AND ASSETS IS SUBMITTED.
- 3. Send the application and proof of your household income and assets to:

Dauphin County Bar Association Modest Means Panel 213 N. Front St. Harrisburg, PA 17101

Or email to: LRS@dcba-pa.org

If you have questions about the application, please call our office at 717.232.7536, option 2. For more information go to <u>https//www.dcba-pa.org/community-programs/lawyer-referral-services.aspx</u>.

Your eligibility for this program is determined by qualifications that include household income. To be eligible, your application must demonstrate that you have the ability to pay the \$500 retainer and \$50 per hour.

Within 10 <u>business</u> days of receipt of your fully completed application and required documentation, we will notify you either by email, phone, or mail whether we will be able to provide an attorney for you. If you qualify, we will provide you with the attorney's information at that time. Afterward, you must contact the attorney to schedule the initial consultation and bring the required \$500 deposit, if you wish to hire the attorney.