IN THE UNITED STATES DISTRICT COURT

FOR THE DISTRICT OF COLORADO

Criminal Action No. \_\_\_\_\_\_\_\_\_\_-cr-\_\_\_\_\_\_\_\_\_\_- \_\_\_\_\_\_\_\_\_\_

***United States of America****,*

 Plaintiff,

v.

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,*

 Defendant.

**MOTION FOR APPOINTMENT OF COUNSEL IN A CRIMINAL CASE**

 I am a defendant in this case and am currently not represented by counsel. I believe that I am unable to proceed with the defense in this case without the assistance of counsel. I believe I qualify for the appointment of counsel from the Criminal Justice Act (CJA) Panel, 18 U.S.C. § 3006A(a)(1)(C)-(E).

Under the court’s CJA Plan, a judicial officer of this court may enter an Appointment Order authorizing appointment of a Federal Public Defender (FPD) or CJA Panel attorney when those accused of a crime, or are otherwise eligible for services pursuant to the CJA, are financially unable to pay for adequate representation. As proof of my financial eligibility for appointment of counsel, this motion is accompanied by a completed and certified U.S. Courts’ Financial Affidavit in Support of Request for Attorney, Expert, or Other Services Without Payment of Fee form for appointment of counsel.

I am aware that I am obligated, as a party in this case representing myself, to meet all obligations and deadlines imposed under the law and the rules of procedure, local rules, and the practice of standards of this court until appointed counsel formally enters an appearance in this case. I am also aware that should my circumstances change or that sufficient assets are attributable to me, I may become responsible for repayment of some or all of the costs associated with my defense, in accordance with 18 U.S.C. § 3006A(f). Dated at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(city)*, \_\_\_\_\_*(state)*, this \_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

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

 (Unrepresented Party’s Name)

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

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

(Address)

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

 (Telephone Number)