

Financial Statement for Legal Aid in Criminal Proceedings

Before completing this form, please refer to the guidance notes available on the LSC website.
The information you declare in this form will be checked with the Department for Work and Pensions, HM Revenue and Customs and others.

Your first name:	Your surname:
Other names:	Date of birth:/...../.....

Part A - Income

See Note 12

1 Employment details

1a Are you employed?	You	Your partner
No <input type="checkbox"/>	Go to question 2	No <input type="checkbox"/> Go to question 2
Yes <input type="checkbox"/>		Yes <input type="checkbox"/>
Please provide evidence of income for each job you are employed in.		
Tick this box if you have attached evidence <input type="checkbox"/>		
1b Do you get benefits from work that are not money?	No <input type="checkbox"/>	No <input type="checkbox"/>
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
These can include a company car, luncheon vouchers and free health insurance.		
Please provide form P11D. (This can be requested from Her Majesty's Revenue and Customs)		

See Note 13

See Note 14

1c. Employment details	You	Your Partner
Employer / place of work:		
Address of employer:		
Job title / description:		
Salary or wage: (Please indicate if this is before or after tax is deducted)	£ every Before tax <input type="checkbox"/> After tax <input type="checkbox"/>	£ every Before tax <input type="checkbox"/> After tax <input type="checkbox"/>
Please give details of deductions:	National Insurance £ Tax £ Other £ Please specify:	National Insurance £ Tax £ Other £ Please specify:

Please note that this form is also available in Welsh.

2 Other benefits

If you get a benefit (other than those in question 10a of part A of form CDS14), please say how much you receive and how often. Say if this is every week, two weeks, four weeks, month or year.

See Note 15

2 Do you or your partner receive any other benefits (as listed below)?	You	Your partner
Child benefit	£ every	£ every
Working tax credits/child tax credits	£ every	£ every
Incapacity benefit	£ every	£ every
Retirement pension	£ every	£ every
Industrial Injuries Disablement Benefit	£ every	£ every
Other benefit	Type of benefit	Type of benefit
	£ every	£ every

3 Private pension

See Note 16

3 Do you receive a private pension or a pension from an employer?	You	Your partner
	No <input type="checkbox"/> Go to question 4	No <input type="checkbox"/> Go to question 4
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Please provide the total amount you receive for pensions before tax has been deducted.	Total £ every	£ every
If your pension income is £1000 per month or more, please provide evidence.		

4 Maintenance income

4 Do you or your partner receive maintenance payments for anyone in your household?	You	Your partner
	No <input type="checkbox"/> Go to question 5	No <input type="checkbox"/> Go to question 5
	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
If 'Yes', please say how much.	£ every	£ every
If your maintenance income is £500 per month or more, please provide evidence.		

5 Other income

5a Do you or your partner receive any of the following (please tick all that apply):		
Student grant or loan	<input type="checkbox"/>	Rent from another property <input type="checkbox"/>
Board or rent from family, lodger or tenants	<input type="checkbox"/>	Income from any other source (excluding income declared in Q5b & c) <input type="checkbox"/>
Financial support from anyone else or someone allowing you to use other assets or money e.g. trust funds.	<input type="checkbox"/>	None of the above <input type="checkbox"/> Go to question 5b
Add together the total amount you receive from the above sources of income.	You £ every	Your partner £ every
If you receive income from other sources or property please provide bank statements for the past 3 months to date.		

5b Do you or your partner receive interest from savings? No Go to question 5c
Yes Give details below

No Go to question 5c
Yes Give details below

If 'Yes', please say how much.

£ every

£ every

5c Do you or your partner withdraw a regular amount from your savings to meet your monthly outgoings? No Go to question 6
Yes please say how much

No Go to question 6
Yes please say how much

£ every

£ every

6 Children

6a Are there any children of the family living with you or your partner for whom either of you are in receipt of child benefit?

Yes

No Go to question 7

6b How old will they be at their next birthday?

Number of children aged 1	<input type="text"/>	Number of children aged 11 to 12	<input type="text"/>
Number of children aged 2 to 4	<input type="text"/>	Number of children aged 13 to 15	<input type="text"/>
Number of children aged 5 to 7	<input type="text"/>	Number of children aged 16 to 18	<input type="text"/>
Number of children aged 8 to 10	<input type="text"/>		

Outgoings

See Note 17

7 Housing

7a How much do you and/or your partner pay in total towards your rent or mortgage after deducting housing benefit?

£ every

7b How much Council Tax do you and/or your partner pay in total?

£ per year

7c Do you and/or your partner pay for your keep ('board and lodgings') at the property where you live? No Go to question 8
Yes If 'Yes', please say how much.

£ every

7d If you answered 'Yes' to question 7c, how much of the above is for food?

£ every

7e Please give the name of the person you pay board to and your relationship to them.

Name

Relationship

If your housing costs are over £500 per month you must provide evidence.

8 Childcare costs

See Note 18

Do you and/or your partner pay childcare costs (e.g. to a registered childcare provider)?

£ every

If your child care costs are over £500 per month you must provide evidence.

9 Maintenance outgoings

Do you **and/or** your partner pay maintenance for any children who do not live with you or any ex-partners?

No

Yes

Add together the maintenance you **and/or** your partner pay **in total** for any children and/or ex-partners.

£ every

If you pay more than £500 per month you need to provide evidence.

10 Other questions

- | | You | Your partner |
|--------------------------------------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------|
| 10a Do you have any income, savings or assets which are under restraint or freezing order? | No <input type="checkbox"/>
Yes <input type="checkbox"/> | No <input type="checkbox"/>
Yes <input type="checkbox"/> |

You must provide a copy of the order.

- | | | |
|-----------------------------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------|
| 10b In the last two years, have you been taxed within the 40% income-tax bracket? | No <input type="checkbox"/>
Yes <input type="checkbox"/> | No <input type="checkbox"/>
Yes <input type="checkbox"/> |
|-----------------------------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------|

You must provide a copy of your P60 or your tax calculation sheet (showing your tax liability).

- | | | |
|---------------------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------|
| 10c In the last two years, have you filled in a self-assessment tax form? | No <input type="checkbox"/>
Yes <input type="checkbox"/> | No <input type="checkbox"/>
Yes <input type="checkbox"/> |
|---------------------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------|

You must provide a copy of your full tax return.

Further information

See Note 19

If you declared no income and are not claiming benefits please clarify how you support yourself (e.g. bills, day to day living expenses etc.) Please give any other information you feel is relevant.

Part B - Self-employment, partnerships and directorships

See Notes 20 & 21

Are you or your partner self-employed, in a partnership, a company director or shareholder in a private company?

No Go to Part C on page 6.

Yes Go to question 1.

	You	Your partner
1. Are you or your partner self-employed, in a company partnership, a company director and/or a shareholder in a private company?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Have you ever filled in a self-assessment tax return for HM Revenue & Customs for your self-employment, partnership, directorship or shareholding?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Have you received a self-assessment tax calculation sheet from HM Revenue & Customs telling you about your tax liability? If yes, please say how much: (you must provide a copy with your tax return)	Yes <input type="checkbox"/> £ <input type="text"/> No <input type="checkbox"/> every <input type="text"/>	Yes <input type="checkbox"/> £ <input type="text"/> No <input type="checkbox"/> every <input type="text"/>
4. How many forms of self employment, company partnerships, directorships or shareholdings do you have?		
5. A breakdown of your/your partner's income, based on the last 12 months:	You	Your partner
Total turnover		
Total drawings (personal income)		
Total profit		
Percentage share of profit	%	%
Total dividends from shares		
Total income from share sales		
Total interest from savings		
Income from pension		
Income from trust		
Other income (please give details or complete a separate sheet)		
6. What are the trading names of your/your partner's businesses, company partnerships or directorships:		
a)		
b)		
7. For the above, what are the trading/registered addresses: (Complete an additional sheet if necessary)		
a)		
b)		
What are the names of the people you are in business with?		
8. What is the nature of your business?		
9. How many people work for you?		

1. Do you own or part own your own home?

	You		Your partner
No	<input type="checkbox"/>	No	<input type="checkbox"/> If no, go to question 2.
Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>

If Yes - Is this the same as the usual home address declared on your CDS14?

No	<input type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>

If no, please provide address and postcode

Does anyone other than you or your partner own a share of this property? (not including your mortgage lender).

No	<input type="checkbox"/>
Yes	<input type="checkbox"/>

If yes, please provide details

What percentage of the property do you/your partner own? (not including your mortgage lender)

_____ %	_____ %
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What is the current market value of the property:

£

What is the amount outstanding on any mortgage or loans secured on the property?

£

Please tell us whether the property is:

Detached Semi-detached Terraced

Bungalow Flat/Maisonette Other. Please specify: _____

Number of bedrooms in the property

2. Do you own or part own any other property, land or business premises in the UK or overseas?

No	<input type="checkbox"/> Go to question 3	No	<input type="checkbox"/> Go to question 3
Yes	<input type="checkbox"/>	Yes	<input type="checkbox"/>

If yes and the property is residential please provide the address and postcode:

Market Value	Mortgage outstanding
£ <input style="width: 150px;" type="text"/>	£ <input style="width: 150px;" type="text"/>

Does anyone other than you or your partner own a share of this property?

No	<input type="checkbox"/>
Yes	<input type="checkbox"/>

If yes, please provide details

What share do you/your partner own in this property?

_____ %	_____ %
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Please tell us whether the property is:

Detached Semi-detached Terraced

Bungalow Flat/Maisonette Other. Please specify: _____

Number of bedrooms in the property

If the property you own is commercial please provide the address and postcode and how it is used:

Market Value	Mortgage outstanding
£ <input style="width: 150px;" type="text"/>	£ <input style="width: 150px;" type="text"/>

If you own land please give the address, acreage and advise how it is used:

Market Value	Mortgage outstanding
£ <input style="width: 150px;" type="text"/>	£ <input style="width: 150px;" type="text"/>

3. Do you/your partner have any UK or overseas:

- | | | |
|----------------------------------|------------------------------|-----------------------------|
| a) Bank Accounts | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| b) Building Society Accounts | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| c) Cash ISAs | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| d) Premium Bonds | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| e) National Savings Accounts | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| f) National Savings Certificates | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| g) Any other cash investments | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

Please give details of the savings and investments that this is based on below and continue on another sheet if necessary.

Bank or building society <input type="text"/>	Account number <input type="text"/>	Type of account <input type="text"/>
Name of account holder <input type="text"/>	Sort code <input type="text"/>	Current balance £ <input type="text"/>
Bank or building society <input type="text"/>	Account number <input type="text"/>	Type of account <input type="text"/>
Name of account holder <input type="text"/>	Sort code <input type="text"/>	Current balance £ <input type="text"/>
National Savings Certificate <input type="text"/>	Type of investment <input type="text"/>	Cash savings value £ <input type="text"/>
Premium Bond holder's number <input type="text"/>		Cash savings value £ <input type="text"/>

You must provide evidence of the above.

4. Do you and/or your partner own any:

- | | | |
|-----------------------------------------------------------|------------------------------|-----------------------------|
| a) Stocks (please include any gilts and government bonds) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| b) Shares | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| c) PEPs | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| d) Share ISAs | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| e) Unit Trusts | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| f) Investment Bonds | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| g) Other lump sum investments | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If yes, please provide details below

Details of investments	Approximate value
	£
	£
	£
	£
	£
	£

You must provide evidence of the above.

(continue on another sheet if necessary)

5. Do you stand to benefit from a trust fund in the UK or overseas?

No Go to Part D.

Yes

If yes, please provide:

The amount held in the trust fund

£

Yearly dividend

(you must provide a copy of the trust document)

£

Part D - Payment details

This section does not need to be completed for the following:

- Summary offence
- Committals for Sentence

1. What is your preferred monthly payment date?

What is your preferred method of payment ?

- Direct Debit Standing Order
 Pay Point Card Cheque
 Credit/Debit Card over the telephone
 Bank Giro Credit

If you have chosen to pay by Direct Debit, please provide the following:

Bank name

Account number

Branch

Name of account holder

Sort code

Signature

Declaration

See Note 23

Authority by your partner

If you have a partner whose details have been completed on this form, they must sign the authority below.

This is a true statement of all my income.

I agree to the Legal Services Commission and HM Courts Service or my partner's solicitor checking these facts with others such as the Department for Work and Pensions and HM Revenue & Customs. I authorise those people or organisations to provide the information that they may request.

Signature..... Date...../...../.....

Full name (in BLOCK CAPITALS).....

Your declaration

This is a true statement of my financial circumstances and that of my partner. I understand that if I tell you anything untrue on this form, or the documents I send with it, or leave anything out:

- a) I may be taken to court; or
- b) I may have to repay all of the cost of my legal aid to the Legal Services Commission, and in addition, my legal aid may be taken away.
- c) The Legal Services Commission may vary the amount of any Contribution Order I have to pay (if my case is in the Crown Court)

I understand that, in Crown Court proceedings, the information given in this form will be used to determine my liability to contribute to the costs of my defence representation under an Income Contribution Order (during the case) and a Final Contribution Order (at the end of my case if I am convicted).

I understand that I am required to tell my solicitor and write to the Court if I no longer want representation and I understand that if I decline representation, I may still be liable for costs incurred to that point.

I understand that if I have made a statement that is false, or I knowingly withhold information my legal aid may be withdrawn and I may be prosecuted under s21 of the Access to Justice Act 1999, which may result in a prison sentence or a fine.

I authorise such enquiries as are considered necessary to enable HM Courts Service or the Legal Services Commission or my solicitor to ascertain my or my partner's true financial position.

I consent to the disclosure of any information by other parties that may assist in their enquiries.

I consent to the Legal Services Commission or my solicitor contacting my partner for information and/or evidence I have given about their means.

I will:

- d) Provide more evidence if the Legal Services Commission or HM Courts Service ask; and
- e) Tell the Legal Services Commission or HM Courts Service if anything I have said here changes

I consent to the Legal Services Commission, HM Courts Service or my solicitor contacting my partner where they are unable to sign or fill in the form, to verify his or her financial information.

I understand that if the information is incorrect or my partner refuses to provide information my legal aid may be withdrawn (if my case is in the magistrates' court) or I may be liable to pay sanctions (if my case is in the Crown Court).

I understand that if my case goes to the Crown Court or any higher court, I may be required to pay some or all of the costs of the proceedings through a Recovery of Defence Costs Order, or, Crown Court Income Contribution Order during the proceedings and, if I am convicted, a Final Contribution Order at the conclusion of the proceedings.

I understand that, if my case goes to the Crown Court, if I fail to pay one or more monthly payments in accordance with my Income Contribution Order, interest may be charged and/or enforcement proceedings may be brought against me and I may have to pay the costs of those enforcement proceedings in addition to the payments required in my Contribution Order.

Additionally, if I am convicted and I am ordered to pay a Final Contribution Order, if I do not pay that amount, then interest may be charged and/or enforcement proceedings may be brought against me in the county court or High Court, which could result in a charge being placed on my home. I will also be liable for the costs of those enforcement proceedings.

I also understand that I may be required to provide details of my financial circumstances to HM Courts Service or the Legal Services Commission, so that the Legal Services Commission or HM Courts Service can consider whether an Order should be made and the terms of that Order.

I have been remanded into custody by the Court

Signature..... Date...../...../.....

Full name (in BLOCK CAPITALS).....

