

FINANCIAL AFFIDAVIT

CJA-23
(Rev. 5/98)

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)

IN THE CASE OF _____ VS. _____

FOR _____
AT _____

LOCATION NUMBER

DOCKET NUMBERS
Magistrate
District Court
Court of Appeals

PERSON REPRESENTED (Show your full name)

Sayed Abdul Malike

- 1 Defendant - Adult
- 2 Defendant - Juvenile
- 3 Appellant
- 4 Probation Violator
- 5 Parole Violator
- 6 Habeas Petitioner
- 7 2255 Petitioner
- 8 Material Witness
- 9 Other (Specify) _____

CHARGE/OFFENSE (describe if applicable & check box →) Felony Misdemeanor

21 USC 844

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOYMENT	Are you now employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self Employed
	Name and address of employer: <i>Yellow Cab (New York City)</i>
	IF YES, how much do you earn per month? \$ <i>1,000</i> IF NO, give month and year of last employment How much did you earn per month? \$ _____
	If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	RECEIVED SOURCES
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES
CASH	Have you any cash on hand or money in savings or checking account <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ <i>41,000</i>
	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
PROPERTY	VALUE DESCRIPTION
	IF YES, GIVE THE VALUE AND DESCRIBE IT

DEPENDENTS	MARITAL STATUS	Total No. of Dependents	List persons you actually support and your relationship to them
	<input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	<i>2</i>	

DEBTS & MONTHLY BILLS <small>(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)</small>	APARTMENT OR HOME:	Creditors	Total Debt	Monthly Payt.
		<i>Credit Cards</i>	<i>\$ 25,000</i>	<i>\$ 2,000</i>
		<i>Fleet Bank Loan</i>	<i>\$ 6,500</i>	<i>\$ 150.00</i>
		<i>Rent</i>	<i>\$ 375.00</i>	<i>\$</i>

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) *5/21/03*

SIGNATURE OF DEFENDANT (OR PERSON REPRESENTED) *[Signature]*

