Defendant Name:	LOCK, ASHLI RENE				Filed 22 March 24 A9:41
Date:	March 24, 2022	SPN:	02696726	DOB:	June 8, 1984 Marilyn Burgess - District Cle
Court:	179th	Cause:	176387701010	Offense:	ABAN/ENDANG CHILD W/INT TO RET
Court:		Cause:		Offense:	
Court:		Cause:		Offense:	
Court:		Cause:		Offense:	
Special Needs:	Eye glasses				

Court:			Caus	e:	Offens	se:				
Special Needs:	Eye glasse	es								
AFFIDAVIT OF FINANCIAL CONDITION (FELONY)										
Defendant Status: Jail										
Type of Bond (check one, if any):			CASH	☐ PERSON	NAL PRETRIAL SURETY (BONDSMAN			NDSMAN)		
Number of people in	family or h	household	that re	ely on you for	financial support	(not including yo		2		
	Nam	ne			Age	Relationship				
Minor Child					12	Child				
Minor Child					18 months	Child				
						PLEASE SELECT				
						PLEASE SELECT				
I live at (address):			2930 W Sam Houston Pkwy Apt. 221 Houston, TX 77041							
How long at this add			1 month			How long at las	st address:	3 years	3 years	
Address type (house, apartment, etc.):			Hotel			Own, Rent, Oth	her:	Not Applicable	Not Applicable	
My employment status is:			Full-time employed							
iviy employment sta	tus is.		Full-tii	me employed						
Employer's name:	tus is.			me employed /orks 30						
	tus is.		Tap W		on, TX					
Employer's name:			Tap W	orks 30	on, TX	Supervisor's na	ame:	John Winsniak		
Employer's name: Employer's address:			Tap W Eldrige	orks 30	on, TX	Supervisor's na		John Winsniak 3 weeks		
Employer's name: Employer's address: Employer's telephon	e number:		Tap W Eldrige	/orks 30 e Pkwy Housto	on, TX	•				
Employer's name: Employer's address: Employer's telephon Job or occupation: If not employed, my	e number: last job wa		Tap W Eldrige	/orks 30 e Pkwy Housto nder/ Server		How long empl		3 weeks		
Employer's name: Employer's address: Employer's telephon Job or occupation: If not employed, my Monthly	e number:	as:	Tap W Eldrige Barter	/orks 30 e Pkwy Housto nder/ Server Necessar	y Monthly Living	How long empl	loyed:	3 weeks Nonexempt Assets		
Employer's name: Employer's address: Employer's telephon Job or occupation: If not employed, my Monthly Your Salary	last job wa	1000.00	Tap W Eldrige Barter	/orks 30 e Pkwy Housto nder/ Server Necessar Rent/Mortgag	y Monthly Living	How long empl	loyed: Cash on H	3 weeks Nonexempt Assets and	2.00	
Employer's name: Employer's address: Employer's telephon Job or occupation: If not employed, my Monthly Your Salary Spouse's Salary / Ot	last job wa	as:	Tap W Eldrige Barter	/orks 30 e Pkwy Housto nder/ Server Necessar Rent/Mortgag Insurance	y Monthly Living ge and	How long empl Expenses 1600.00	Cash on Ha	Nonexempt Assets and tocks, Bonds, and	2.00	
Employer's name: Employer's address: Employer's telephon Job or occupation: If not employed, my Monthly Your Salary Spouse's Salary / Ott Household Income	last job wa	1000.00 0.00	Tap W Eldrige Barter	/orks 30 e Pkwy Housto nder/ Server Necessar Rent/Mortgag Insurance Car Payment a	y Monthly Living ge and	Expenses 1600.00	Cash on Haward Value of Solinvestmen	Nonexempt Assets and tocks, Bonds, and its	0.00	
Employer's name: Employer's address: Employer's telephon Job or occupation: If not employed, my Monthly Your Salary Spouse's Salary / Ot Household Income SSI/SSDI	last job wa	1000.00 0.00	Tap W Eldrige Barter	/orks 30 e Pkwy Housto nder/ Server Necessar Rent/Mortgag Insurance Car Payment a Utilities	y Monthly Living ge and	Expenses 1600.00 0.00 0.00	Cash on Have Value of Solorestmen Amount in	Nonexempt Assets and tocks, Bonds, and its Savings Account	0.00	
Employer's name: Employer's address: Employer's telephon Job or occupation: If not employed, my Monthly Your Salary Spouse's Salary / Ott Household Income	last job wa y Income	1000.00 0.00	Tap W Eldrige Barter	/orks 30 e Pkwy Housto nder/ Server Necessar Rent/Mortgag Insurance Car Payment a	y Monthly Living ge and	Expenses 1600.00	Cash on Have Value of Solution Amount in Amount in	Nonexempt Assets and tocks, Bonds, and its	0.00	

Monthly Income		
Your Salary	1000.00	
Spouse's Salary / Other	0.00	
Household Income		
SSI/SSDI	0.00	
TANF	0.00	
Social Security Check	0.00	
Child Support	0.00	
Other Government Check	0.00	
Government Housing	0.00	
Other Income	0.00	
TOTAL INCOME	1000.00	

Necessary Monthly Living Expenses		
Rent/Mortgage and	1600.00	
Insurance		
Car Payment and Insurance	0.00	
Utilities	0.00	
Cell Phone	0.00	
Clothes/Food	300.00	
Day Care / Child Care	0.00	
Health Insurance	0.00	
Medical Expenses	0.00	
Credit Cards	0.00	
Court-Ordered Monies	0.00	
Child Support	0.00	
TOTAL NECESSARY EXPENSES	1900.00	

2.00
0.00
0.00
0.00
0.00
·
2.00

I have been advised of my right to representation by counsel in the trial of the charge pending against me. If I am asking the court to appoint counsel for me, then I certify that I am without means to employ counsel of my own choosing. I swear under penalty of perjury that the above information is true, correct, and complete. The information listed above is accurate and I will immediately notify the court of any changes in my financial situation. I understand that all information in this affidavit is subject to verification and that falsifying this information is a criminal offense.

Tam asking the court to appoint counsel for me.	
March 24, 2022	all soll
Date	Defendant Signature

Sworn to and subscribed before me on the date shown.

Deputy District Clerk / Peace Officer / Pretrial Services Agent

Defendant refused to provide data NO