

Modest Means Program - PUBLIC APPLICATION FORM

Oregon State Bar, Modest Means Program, PO Box 231935, Tigard, OR 97281-1935
Voice: (503) 684-3763 (800) 452-7636 Fax: (503) 431-6444

PLEASE READ BEFORE COMPLETING APPLICATION:

Oregon lawyers created the Modest Means Program to help moderate-income Oregonians find affordable legal assistance. The program is intended to help those who earn too much to qualify for legal aid, but who cannot afford traditional legal fees. Modest Means lawyers have agreed to charge reduced rates for legal work provided to clients referred to them through the program. There is no grant, fund or subsidy that makes up the difference between the lawyers' regular rates and the Modest Means Program rates. The lawyers charge reduced rates because they believe in the mission of this program and want to help.

Types of Matters: Modest Means lawyers only handle certain kinds of family law, criminal defense, landlord/tenant and foreclosure matters. If the specific area of law with which you need help is not listed on the application, then it is not part of the program.

To Apply: Before you can be referred to a Modest Means lawyer you must apply and be pre-qualified. To apply, you must complete the application form and return it to us by fax, mail, or email (legalhelp@oregonstatebar.org--PDFs ONLY). You can call the number listed above for the application form or download it from the bar's website at www.oregonstatebar.org.

Please do not forget to sign and date your application. Your application will not be processed if you do not fill out your application completely, or fail to sign or date it. Do not include any other documents with your application – any documents you send to us will not be returned. We process most applications within one (1) business day. If you provide an email address, please check your email account for your referral or for questions that we may have about your application.

Eligibility: Eligibility is based on the type and location of your legal matter, your income and assets, your location, and availability of participating lawyers in your area. It is important to understand there are a limited number of lawyers in the program, and there may not be a Modest Means lawyer in your county. We cannot guarantee that we will have a lawyer for you even if you pre-qualify. In addition, your legal matter must be in Oregon and both parties must live in Oregon to be eligible for the Modest Means Program. If both parties do not live in Oregon you will not be referred to a Modest Means Program lawyer even if your legal matter is in Oregon.

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Qualification Process: You will be contacted by email or telephone after your application has been reviewed. If you pre-qualify, we will give you the name and phone number of a lawyer in your area for you to contact. The lawyer to whom we refer you will receive a copy of your application and may ask additional questions to confirm your eligibility for the program. The lawyer has the final say as to whether or not you qualify for the program.

Initial Consultation: If you are referred to a Modest Means lawyer, you will need to call the lawyer to make an appointment for your initial 30-minute consultation. Your consultation will cost no more than \$35, payable at the time that you meet with the lawyer.

Hiring a Modest Means Program Lawyer: Whether or not you hire the lawyer to represent you after your initial consultation is a decision for both you and the lawyer to make. We cannot guarantee that a lawyer will agree to take your case. All Modest Means lawyers who participate are volunteers and have the right to choose whether or not they will accept your case.

Legal Fees & Costs: Lawyers who are willing to accept Modest Means clients have agreed to charge no more than \$60, \$80, or \$100 per hour for any services they provide beyond the initial \$35, 30-minute consultation. Which hourly rate will apply to you depends upon your income and assets. You will be asked to pay a retainer (deposit against fees) up front. The retainer amount will be determined by the lawyer following your initial consultation. The amount of the retainer will depend on the lawyer's estimate of how much work will be required to complete your case. You will also be charged for any court fees and other direct costs, including phone charges, photocopy expenses, etc.

The Modest Means Program is not a legal aid program and it is not a pro bono (free) program. You must be able to pay \$35 for an initial consultation, plus \$60/80/100 per hour (as applicable) for any work done beyond the initial consultation. In order to be referred to a Modest Means Program lawyer, your application must demonstrate that you have the ability to pay these fees. If someone will be helping you pay for your legal fees and costs please explain that on your application. If you are unable to pay these fees and costs, you should contact the legal aid office in your county of residence. The Oregon State Bar does not have a referral program for pro bono (free) lawyers.

Portland Metro Area: (503) 684-3763
Elsewhere in Oregon: (800) 452-7636
Fax: (503) 431-6444

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INSTRUCTIONS: Please print clearly or type. Please sign and date your application. Your application will not be processed if you do not fill out your application completely, or fail to sign or date it. Do not include any other documents with this application – any documents you send to us will not be returned. We process most applications within one (1) business day. If you provide an e-mail address, please check your e-mail account for your referral or questions we may have about your application. Fax or mail your completed application to us:

OREGON STATE BAR MODEST MEANS PROGRAM, P.O. BOX 231935, TIGARD, OR 97281-1935
FAX: (503) 431-6444 EMAIL: legalhelp@oregonstatebar.org

Please note: All information provided will be treated as confidential communications made for the purpose of facilitating the rendering of professional legal services to you. We will preserve the confidentiality of all such information unless otherwise required by law.

First Name	Last Name
Address	
City	Zip Code
Phone Number	E-mail Address [If you provide an e-mail address that is how you will be notified.]

Family Law (No Appeals)

Divorce/Separation
Custody/Parenting Time
Support/Modification
Juvenile/DHS/CSD/SCF issues
Paternity
Restraining Orders
Process Questions
Domestic Violence
Grandparent/3rd Party Rights
Spousal Support
Coaching (General)
Document Review

Criminal Law (No Capital Charges or Appeals)

Misdemeanor
Lesser Felony
Major Felony
DUII/DWS
Parole/Probation
Expungement

Real Property (No Appeals)

Foreclosure
Landlord-Tenant (Tenant)
Landlord-Tenant (Landlord)
Mobile Home (Tenant)
Mobile Home (Landlord)

In which city/county do you need assistance?	
When is your next court date (if applicable)?	
What is the name of the opposing party?	
Does the opposing party have an attorney?	
If yes, what is the attorney's name?	
Are both parties in Oregon?	
Have you already consulted with an attorney?	
If yes, what is the attorney's name?	
Reason you are looking for another attorney:	

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First Name	Last Name
Phone Number	E-mail Address

A household consists of people with whom you share income and expenses, who live in your home at least 50% of the time.

How many people live in your household including you? ____ Adults ____ Children

Marital Status: Unmarried or Widowed Married Separated Divorced

Do you and your spouse live in the same household? Yes No N/A

Do you rent or own the home in which you are living? Rent Own

Do you own any land or a house, even if you do not live there? Yes No

Make of each vehicle owned	Year	Model	Value (est.)
1. _____	_____	_____	\$ _____
2. _____	_____	_____	\$ _____

Gross Income (before taxes)	(per month)
Wages:	\$ _____
Spousal Support:	\$ _____
Child Support:	\$ _____
Veteran's Benefit:	\$ _____
Unemployment:	\$ _____
SSI/SSD:	\$ _____
TANF (not SNAP):	\$ _____
Public Benefits, Aid, SNAP:	\$ _____
Retirement/Investment Income:	\$ _____
Other income (please specify):	\$ _____
Total Gross Income:	\$ _____

Liquid Assets	Value (est.)
Checking Account Balance	\$ _____
Savings Account Balance	\$ _____
Money Market/Other Account	\$ _____
Total Liquid Assets:	\$ _____

Non-liquid Assets	Value (est.)
Amount in Retirement Plans (401k), mutual funds, securities, bonds, etc.:	\$ _____
Other non-liquid assets (please specify):	\$ _____
Total Non-liquid Assets:	\$ _____

Special Expenses & Debts¹	(Per Month)
Medical ² (see explanation below):	\$ _____
Child Care ³ (see explanation below):	\$ _____
Transportation ⁴ (see explanation below):	\$ _____
Spousal Support:	\$ _____
Child Support:	\$ _____
Total Special Expenses/Debts:	\$ _____

Partner/Family Members in Household :	(Gross Income per month)		
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;"><u>Name</u></td> <td style="width: 40%; border-bottom: 1px solid black;"><u>Relationship</u></td> </tr> </table>	<u>Name</u>	<u>Relationship</u>	\$ _____
<u>Name</u>	<u>Relationship</u>		
If not already listed above, what is your spouse's gross income per month?	\$ _____		
(Please estimate, if separated.)	\$ _____		

¹Ordinary expenses that most people have (such as rent, food, utilities) are considered in the basic income calculations and should not be listed here. Other personal and discretionary expenses such as car payments, car insurance, and credit card debts are not considered under our guidelines.
²"Medical" refers to medical expenses that are not covered by insurance. ³"Child Care" refers to costs incurred while a parent is at work.
⁴"Transportation" refers to basic transportation costs to get to and from work (bus tickets, gas).

Have you submitted an application before? Yes No If so, when? _____

By signing below, I certify that all information provided is true and correct to the best of my knowledge. I understand and agree that if I provide inaccurate, incomplete, misleading or false information on this application, or to any Modest Means Program attorney, I may be disqualified from participation in any and all Referral & Information Services programs, including the Modest Means Program.

Signature _____ **Date** _____

BELOW IS FOR OFFICE USE ONLY

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First Name	Last Name
Phone Number	E-mail Address

Briefly describe the legal matter for which you are seeking assistance: