ANNUAL CERTIFICATION OF ATTORNEY CURRENTLY ON MASTER LIST

ATTORNEY'S LAST NAME:	
ATTORNEY'S FIRST NAME:	
Note any changes in your contact information:	

I, ______, the undersigned attorney, hereby state under oath that I am in compliance with the general and specific qualifications for inclusion on the Master List and at the level on the graduated list where my name currently appears. I further state under oath that I have by actual attendance accrued:

- □ A minimum of ______(___) hours of C.L.E. credits in criminal law. No self-study hours have been counted.
- □ A minimum of _____ (___) hours of C.L.E. credits in juvenile law. You must have at least six (6) hours of C.L.E. in juvenile law annually to receive appointments in juvenile cases.
- □ Have ______ (____) hours, not to exceed ten (10) hours) from the preceding calendar year in C.L.E. credits to apply to this year's requirement.
- □ My State Bar of Texas Minimum Continuing Legal Education Annual Verification form is attached and I have highlighted the acquired hours.

I further state under Oath that in the twelve (12) months immediately preceding this date,

- □ I have tried ______ misdemeanor cases to JURY verdict.
- □ I have tried ______ juvenile cases to JURY verdict.
- □ I have tried ______ non-capital felony cases to JURY verdict.
- □ I have tried ______ capital (death sought) felony cases to JURY verdict.
- □ I have tried ______ capital (death penalty waived) felony cases to JURY verdict.

- □ I have filed ______ appellate briefs in misdemeanor cases.
- □ I have filed ______ appellate briefs in non-capital felony cases.
- □ I have filed ______ appellate briefs in capital death penalty cases.
- \Box I have filed ______ 11.071 death penalty writ applications.

I further certify that I have read and am familiar with all terms, provisions and requirements of the Indigent Defense Plan for Brazoria County, Texas in affect as of this date and I will comply with all terms of that plan as well as any amendments to the Plan made after this date.

Attorney Signature

On this the _____ day of _____, 20____, personally appeared before me, ______, who after being properly identified and placed under oath swore before me that all of the information stated on the foregoing Annual Certification of Attorney is the truth.

Signature of Person Taking Oath

Office of Person Taking Oath Brazoria County, Texas

NOTE: Annual certification is to be filed by December 1st of each year.