REQUEST FOR APPOINTMENT OF A LAWYER

Commonwealth of Virginia

VA. CODE ANN. §§ 16.1-266, 267 §§ 19.2-159, 160, 163

Case No. GC26010506-00

[ ] Circuit Court
[X] General District Court
[ ] Juvenile and Domestic Relations District Court

Va Beach
CITY OR COUNTY

Jeter, Michael
[redacted] Norfolk Va. 23500 [redacted] Adult

ADDRESS TELEPHONE NUMBER

TO THE ADULT: You have been charged with an offense punishable by confinement in a state correctional facility or in jail, including charges for revocation of suspension of imposition or execution of sentence or probation; or you are a party in a case involving allegations of abuse and/or neglect or a case in which your residual parental rights and responsibilities may be terminated. You have the right to be represented by a lawyer in this matter. The court must also consider appointing a lawyer to represent the parent or guardian of a child who is the subject of a foster care plan, foster care review or permanency planning hearing. You may hire a lawyer at your own expense or, if the court decides that you are unable to pay for a lawyer, this court will appoint a lawyer to represent you. If the judge appoints a lawyer to represent you, the lawyer will be paid with public funds whether or not you are convicted. However, if you are convicted, you must pay some or all of the court-appointed lawyer's fee as part of the costs of prosecution. You may also waive your right to a lawyer.

REQUEST FOR APPOINTMENT OF A LAWYER—STATEMENT OF INDIGENCY

I have been told this day by this court of my right to be represented by a lawyer in the case involving me. I certify that I cannot pay to hire a lawyer and I ask the court to appoint a lawyer for me. My financial statement is with this request.

I have been told that the lawyer appointed for me will be paid with public funds, but if I am convicted of a criminal offense, I will have to pay some or all of the court-appointed lawyer's fee as part of the costs of prosecution. This lawyer will represent me in this case in all state courts until relieved or replaced by another lawyer.

If the court finds that I am not indigent, and if the court then does not appoint a lawyer to represent me, I understand that I may hire my own lawyer. If I come to court without a lawyer on the trial date, I may be deemed to have waived my right to counsel.

I further understand that if I am charged with a criminal offense, the outcome of the case may have federal immigration and naturalization consequences.

10/20/26
DATE

[signature]
ADULT

The court was advised that ....., a lawyer, has been retained to represent the accused in this court.

This information was provided by:

[✓] the above-named person [ ] the lawyer [ ] .....

I understand if found guilty or deferred finding is entered, the Public Defender's fee is $120.00 per Misdemeanor charge and higher per Felony charge.

DATE [ ] JUDGE [✓] CLERK

ORDER OF APPOINTMENT OF COUNSEL

THE REQUEST FOR APPOINTMENT OF A LAWYER WAS EXECUTED UNDER OATH. HAVING EXAMINED THE ADULT AND CONSIDERED OTHER COMPETENT EVIDENCE, I FIND THAT

[✓] the Adult is not indigent and not entitled to representation by a court-appointed attorney.

[✓] the Adult is indigent within the guideline set forth in the law and is entitled to representation by court-appointed counsel;

[ ] the Adult is not indigent and the Adult refuses to either employ counsel or waive his right to representation by a lawyer, but that the following circumstances and the ends of justice require the appointment of counsel:

.....

.....

Therefore, I appoint the lawyer indicated below to represent the adult at such hearings and all other stages of the proceeding in this court and in any other court to which this case may be appealed or certified until relieved or replaced by another lawyer.

[✓] The Clerk shall send a copy of this Order to the Indigent Defense Commission as notice that the lawyer indicated below is not on the list maintained by the Commission, but has otherwise demonstrated to the court an appropriate level of training and experience.

NAME, ADDRESS OF COURT APPOINTED LAWYER

PD

12/3/26 @ 830 E
NEXT HEARING DATE AND TIME

10/20/26

PD COPY 10·20·26

FORM DC-334 REVISED 10/25 (A261573 11/25)

FINANCIAL STATEMENT – ELIGIBILITY DETERMINATION Case No. .....
FOR INDIGENT DEFENSE SERVICES Commonwealth of Virginia VA. CODE § 19.2-159

PRESUMPTIVE ELIGIBILITY

[ ] I currently receive the following type(s) of public assistance in ..... CITY/COUNTY

[ ] TANF $ ..... [ ] Medicaid [ ] Supplemental Security Income $ .....

[ ] SNAP (food stamps) $ ..... [ ] Other (specify type and amount) .....

[ ] I currently do not receive public assistance.

Names and address of employer(s) for defendant and spouse:

Self Unemployed

Spouse (not applicable if alleged victim) .....

NET INCOME:		**Self**	**Spouse**
Pay period (weekly, every second week, twice monthly, monthly)	0	0	0
Net take home pay (salary/wages, minus deductions required by law)	0	$ 0	0
Other income sources (please specify)			
			$ 0

EMPLOYMENT HISTORY:
Were you employed at the time of your arrest? [ ] yes [ ] no
If yes, my net take home pay was [ ] per week [ ] month $ .....
If no, length of time since last employed? .....
Total wages earned last calendar year? $ .....

COURT USE ONLY

TOTAL INCOME $ 0 + 0 = 0 **A**

ASSETS:			
Cash on hand		$ 0	0
Bank Accounts at:		$ 0	0
Any other assets: (please specify)			
_____	with a value of	$ 0	0
Real estate – $ _____ NET VALUE		$ 0	0
_____ YEAR AND MAKE	with net value of	$	.....
Motor Vehicles { _____ YEAR AND MAKE	with net value of	$	.....
Other Personal Property: (describe)		$	.....

COURT USE ONLY

TOTAL ASSETS $ 0 + 0 = 0 **B**

1 Number in household defendant has financial responsibility for, including defendant.

EXCEPTIONAL EXPENSES (Total Exceptional Expenses of Family)

Medical Expenses (list only unusual and continuing expenses) ..... $ .....
Court-ordered support payments/alimony ..... $ .....
[ ] deducted from paycheck [ ] not deducted from paycheck
Child-care payments (e.g. day care) ..... $ .....
Other (describe): ..... } $ .....

COURT USE ONLY

This statement is made under oath. Any false statement may constitute a violation of law under Virginia Code § 19.2-161 and be subject to criminal penalty, including incarceration.

TOTAL EXPENSES $ ..... = **C**
COLUMN "A" plus COLUMN "B" minus
COLUMN "C" equals available funds =

I hereby state that the above information is correct to the best of my knowledge.

Name of defendant (type or print) Michael Peter

10/20/26 DATE

Michael Peter SIGNATURE

Sworn/affirmed and signed before me this day.

10/20/2026 DATE

M Thompson SIGNATURE

Dep Clerk TITLE

FORM DC-333 REVISED 10/11 (A262374 01/26)

VIRGINIA: IN THE GENERAL DISTRICT COURT FOR THE CITY OF VIRGINIA BEACH

Commonwealth

v. Michael Thomas Jeter, Defendant

Docket No.(s): GC/GT GC2601050 6-00

APPOINTMENT OF COUNSEL

OFFICE OF THE PUBLIC DEFENDER

1. The Court reviewed your information and found you do qualify for a Public Defender. Accordingly, a Public Defender or Court Appointed attorney has been appointed to represent you.
2. If you are being held in custody, the Public Defender's office or your Court Appointed attorney will send a representative to speak with you and answer any specific questions concerning your case at the jail within a few days of being appointed.
3. If you are not being held in custody, the Public Defender's office or your Court Appointed attorney will send a letter to the address listed below asking you to contact their office promptly to prepare your case.
4. If you do not receive a letter from the Public Defender's office within seven days of this notice, you must contact the Public Defender's Office in person or by phone at 757-427-6050. If you don't receive a letter from your Court Appointed attorney, contact their office using the information below.
5. It is your responsibility to notify the Public Defender's Office or your Court Appointed Attorney's office and the Court of any changes in your address or telephone number.

COURT APPOINTED COUNSEL

6. The Court reviewed your information and found you qualify for a Court Appointed Attorney. Accordingly, the Court has appointed the following attorney to represent you:

Court Appointed Attorney's Information:

Attorney's Name

Attorney's Address

( ) Attorney's Telephone Number

Defendant's [redacted] Apartment Number

Norfolk City VA. State [redacted] Zip Code

[redacted] Telephone Number

I have received a copy of this information and understand I must appear in Virginia Beach General District Court on 12/3/2026 at 8:30 a.m./p.m. in Courtroom E.

Defendant's Signature 10/20/26 Date

MC 25-3 REV 2/24