

## **ORDER APPOINTING COUNSEL**

## Cause No. 20-DCR-090508

The State of Texas

Vs.

JERMAINE LEWIS, JR

Upon determination by the Court that this Defendant is indigent, CARLA J. POST is hereby appointed to defend JERMAINE LEWIS, JR.

February 03, 2020

Presiding Administrative Judge

Brenda Mullenuf

1020 FEB 10 AM 8: 46

And 72 Feb Meller

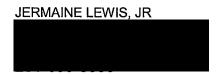
CLERK DISTRICT COURT

AND FORT BEND CO. IX

20 – DCR – 090508 ORAP Order Appointing 6054927







### ORDER AND NOTICE OF COURT APPOINTED ATTORNEY

Cause No. 20-DCR-090508

The State of Texas Vs. JERMAINE LEWIS, JR

You are hereby notified that CARLA J. POST, whose address and telephone number appear below, is hereby appointed as your attorney. Such representation will continue until this case is disposed, and appeals are exhausted, or replaced by an attorney whom you choose to retain.

Your FIRST COURT DATE is as follows: February 20, 2020 at 2:00 PM at the Justice Center.

IMPORTANT: If the Bail Bond you received at the jail gives you a different court date than the one listed above for the bond cases, you MUST appear on the earliest date to prevent your bond from being forfeited. It is your responsibility to be present at all of your court dates.

You should arrive at the Court Room at least thirty (30) minutes prior to your arraignment time to allow for parking and to meet your attorney. If you are late or do not appear, a warrant will be issued for your arrest and your bond will be forfeited.

Presiding Administrative Judge

Brenda Mullenief

CARLA J. POST PO BOX 178 BAY CITY TX 77404 979-323-9494





## <u>AFFIDAVIT</u>

DECLARACIÓN BAJO PROTESTA

Carla post 2/20/20 @ 2 pm 30

THE STATE OF TEXAS §	f. 1
EL ESTADO DE TEXAS	•
COUNTY OF FORT BEND §	
CONDADO DE FORT BEND	
Transing land	1.6
"My name is <u>ermaine</u> un	, and having been duly sworn I
make this statement under oath. I have been charged wit	<del>-</del> • • • • • • • • • • • • • • • • • • •
declaración bajo protesta. Me han imputado el/los siguiente(s) delito(s):	y habiendo prestado debidamente juramento hago esta
offense: Robbery	DEGREE: F2 Cause #: 20 DCR090508
	GRADO: NAN Causa #: 70000
OFFENSE: PCS	DEGREE: VIA Cause #: LOCK 215121
11/1 0//47/11/14	GRADO: MA Causa #: 20CR 2/5/22
DELITO: ACA ACA INTO	GRADO: FO Causa #: 10 DCV 01937(0
	DEGREE: 10 Cause #: 110000000000000000000000000000000000
	GRADO: Causa #: 19 DCR 084377  DEGREE: FI Cause #: 19 DCR 084377
DELITO: RAG RUDDEM	GRADO: FI Causa #: 19 DCD (X9378
I have been advised by the undersigned magistrate or his	designee of my right to representation by counsel in
the trial of the offense(s) pending against me in language	that I understand AND I:
He sido informado por el juez de instrucción o su designado, en un idioma d	que entiendo, de mi derecho a ser representado por un abogado
durante el juicio por el/los delito(s) de los cuales he sido acusado.	
REQUEST THE COURT TO APPOINT ME COUNSEL	
I certify that I am without means to employ counsel of m	y own choosing and I hereby request the Court to
appoint counsel for me."	
SOLICITO AL TRIBUNAL QUE ME ASIGNE UN ABOGADO DE OFICIO	
Certifico que no tengo los medios para contratar un abogado de mi elección	n y por medio de la presente solicito que el Tribunal me designe uno."
	<u> Jermane lews</u>
	<b>Defendant</b> Defendido
DO NOT REQUEST THE COURT TO APPOINT ME CO	•
The magistrate has asked me if I want to request the app	
appoint counsel for me at this time."	
NO ESTOY SOLICITANDO QUE EL TRIBUNAL ME ASIGNE UN AROGADO	O DE OFICIO
El juez de instrucción me ha preguntado si deseo que se me asigne un abog	rado de oficio. No estoy solicitando al Tribunal que me asigne un
abogado de oficio en este momento."	Annual No. O .
ALDEADY HAVE COUNCE.	Defendant Page 1
ALREADY HAVE COUNSEL	Defendido Grandario Grandario
By my signature below, I certify to the Court that I alread	
representing me in respect to the above referenced offen YA TENGO UN ABOGADO	ise(s)."
Al firmar en el espacio indicado reconozco ante el Tribunal que ya tengo un	abogado asignado / contratado quien me representa con respersa
e//los delito(s) anteriormente mencionado(s)."	and good and the state of the s
	- Hulk
	Defendant
CLIDCORDED AND CHARACTER PEROPERTY AND CHARACTER	Defendido
SUBSCRIBED AND SWORN TO BEFORE ME, the ur day of Feb ,2020, to certify which wit	
day of <u>teb</u> ,2020, to certify which wit	•
Think to brook to restrict the law, to ductoridad que suscribe y	de les les dis de 2020
	XXXX
	MACESTRATE PRESIDING
LANGUAGE: Spanish: Other:	LUEZ DE INSTRUCCIÓN QUE PRESIDE
IDIOMA: Español: Otros:	Tom Fuller
DERMA DIV.C.	Visiting Judge
REMARKS:	Sitting by Assignment



### Salinas, Brandi

From:

Salinas, Brandi

Sent:

Monday, February 3, 2020 2:51 PM

To:

carla@deadrickpostlaw.com

Subject:

Felony/Misdemeanor Appointment - Certificate of Contact

**Attachments:** 

Certificate of Contact.doc

Dear Counsel:

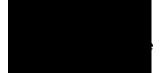
You have been appointed by the court to represent:

Name:

Jermaine Lewis

DOB:

Address:



Phone:

281-660-3036

Charge:

Robbery -20-DCR-090508; PCS - 20-CCR-215121; Unlawful Restraint - 20-CCR-215122;

Agg Aslt W/DW - 19-DCR-089376; Agg Robbery W/DW - 19-DCR-089377;

Agg Robbery - 19-DCR-089378

Court Date:

2-20-20 @ 2:00 PM at The Justice Center

If the defendant has made bond, they may be reached at this address and phone otherwise they will be in the Fort Bend County Jail. As you are aware it is your responsibility to make every reasonable effort to contact the defendant by the end of the next working day after today. Failure to comply with this responsibility may result in your replacement as counsel for the defendant pursuant to Art. 26.04(k) of the Code of Criminal Procedure.

Please reply to this email IMMEDIATELY and acknowledge your receipt of receiving.

Raquel Levy
Administrative Court Services
Indigent Defense Coordinator
301 Jackson St.
Richmond, TX 77469
281-341-3780
FAX #281-238-3224

Raquel.Levy@fortbendcountytx.gov





## FINANCIAL INTERVIEW REPORT

Defendant's Name: Termaine lewis DOB.	
Address	
Phone: 281 660 3636 Residence or Wailing Address Citizenship: Yor N	
Marital Status: Married, Single, Widow/ Widower, Divorced; Separated	
Primary Language: English, Spanish, Deaf; Other	
Reference: Name: Relationship: Phone:	
Ages of Children Supported by Defendant under 18 years	
Financial Information:  Defendant Employed / Unemployed:  Occupation:  Length Employed  Amonths  Last date or year of employment:  Monthly Salary after Taxes: \$ 500	
Spouse Name:	
Spouse Employed/ Unemployed:	
Monthly Salary after Taxes: \$	
Other Income:	
Child Support: Food Stamps:	
Other Sources of Income/Benefits	
Total Household Income: \$	



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