

**Supreme Court of the State of New York  
Appellate Division: Second Judicial Department**

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In the Matter of

against

**ATTORNEY'S CERTIFICATE OF  
APPELLANT'S CONTINUED  
ELIGIBILITY FOR POOR PERSON  
RELIEF AND ASSIGNMENT OF  
COUNSEL ON APPEAL**

Appellate Division Docket No.:

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**THIS FORM MAY NOT BE USED IN ANY CASE IN WHICH THE FAMILY COURT, AFTER THE ASSIGNMENT OF COUNSEL, HAS ISSUED AN ORDER FINDING THAT THE APPELLANT IS OF SUFFICIENT MEANS TO PAY SPOUSAL OR CHILD SUPPORT, OR ARREARAGES THEREOF.**

I, \_\_\_\_\_, an attorney admitted to practice in the State of New York, hereby certify, pursuant to Family Court Act § 1118 and CPLR 1101, that:

1. I am an attorney duly licensed to practice in the State of New York, and a member of an assigned counsel program OR employed by \_\_\_\_\_, which is a legal aid or legal services program representing indigent parties (*strike one*).

2. I was assigned as counsel for \_\_\_\_\_, the petitioner/respondent in the above-entitled proceeding, upon a determination of the Family Court, \_\_\_\_\_ County, pursuant to Family Court Act § 262, that the he/she was indigent and unable to afford the costs, fees, and expenses of the proceeding, and was entitled to the assignment of counsel.

3. On behalf of \_\_\_\_\_, I filed a notice of appeal from an order of the Family Court, \_\_\_\_\_ County, dated \_\_\_\_\_, 20\_\_, which

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\_\_\_\_\_ (*set forth the nature of the order*).

Copies of the order appealed from, the notice of appeal, and any separate decision are attached hereto.

4. To the best of my knowledge, (1) since the date of my assignment, the appellant has not been found to be of sufficient means to pay spousal or child support or any arrearages thereof, and (2) the financial status of the appellant has not changed from the date the Family Court, \_\_\_\_\_ County, determined that he/she was entitled to the assignment of counsel, and (3) he/she is presently, and for the foreseeable future will be unable to afford the costs, fees, and expenses of the above-entitled appeal.

5. To the best of my knowledge, \_\_\_\_\_ is interested in prosecuting the appeal. The appellant's last known address is as follows:

6. I wish to be assigned to represent \_\_\_\_\_ on the appeal in the above-entitled proceeding.

OR

6. I cannot represent \_\_\_\_\_ on the appeal in the above-entitled proceeding, and request that another attorney be assigned to represent him/her.

7. A copy of this certification is being provided to the County Attorney, and to counsel for each other party, or to the party if appearing pro se, and to the law guardian, if any.

Dated: \_\_\_\_\_, New York  
\_\_\_\_\_, 20\_\_

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The following persons have been provided with a copy of the foregoing certificate: