

**PETITION FOR APPOINTMENT OF A LAWYER
FOR MODIFICATION OF SENTENCE
(MARIJUANA-RELATED CONVICTIONS)**

Case Number.

Va. Code § 19.2-303.03

..... [] Circuit Court [] Juvenile and Domestic Relations District Court
CITY OR COUNTY

Commonwealth of Virginia v., Defendant

PETITION FOR APPOINTMENT OF A LAWYER

Pursuant to Va. Code § 19.2-303.03, I request the court appoint a lawyer to assist me with my sentence modification hearing. In support of this request, I state the following:

1. I was adjudicated delinquent or convicted of a felony offense involving the possession, manufacture, selling, giving, distribution, transportation, or delivery of marijuana in violation of §§ 18.2-248, 18.2-248.01, 18.2-248.1, 18.2-255, 18.2-255.2, 18.2-256, 18.2-257, 18.2-258, 18.2-258.02, 18.2-258.1, 18.2-265.3, or 18.2-474.1 committed prior to July 1, 2021;
2. I was sentenced to jail, to the Department of Juvenile Justice, or to the Department of Corrections and was placed on probation pursuant to § 16.1-278.8 or on community supervision as defined in § 53.1-1 for such adjudication or conviction; and
3. I remain incarcerated in a state or local correctional facility or secure facility, or I remain on probation or community supervision for such adjudication or conviction or a combination of such adjudications or convictions as of July 1, 2026.

At the time of sentencing on my marijuana-related conviction, I was not found to be indigent and was not entitled to a court-appointed lawyer. I am currently indigent and cannot pay to hire a lawyer. My financial information is provided below.

A. Public Assistance

[] 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.

B. Names and Address of Employer(s) for Defendant and Spouse

Self.....

Spouse (not applicable if alleged victim)

C. Net Income

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

COURT USE ONLY

TOTAL INCOME \$ + = A

	Self	Spouse
D. Assets		
Cash on hand	\$
Bank Accounts at:	\$
Any other assets: (please specify)		
_____ with a value of	\$
Real estate – \$ _____	\$
NET VALUE		
Motor Vehicles { _____ with net value of	\$
YEAR AND MAKE		
{ _____ with net value of	\$
YEAR AND MAKE		
Other Personal Property: (describe)	\$
TOTAL ASSETS \$		+ = COURT USE ONLY

B

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

E. 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):		
.....	} \$

TOTAL EXPENSES \$ = COURT USE ONLY

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.

..... DATE _____ DEFENDANT'S SIGNATURE _____