



U.S. Department of Justice Bureau of Justice Statistics
(NORC acting as data collection agent)



2024 Census of Public Defender Offices

Name: _____

Title: _____

Name of office: _____

Direct email: _____

Direct phone: _____

Instructions

The 2024 Census of Public Defender Offices (CPDO) is a census of all publicly funded public defender offices with at least one (1) W-2 earning attorney that provides direct public defense representation for adults and/or juveniles who are accused of a crime or delinquency or accused in a trial court of violating conditions of a sentence. Data collected on this form will provide needed information to state and local governments, practitioners, and other stakeholders. The Bureau of Justice Statistics (BJS) greatly appreciates your assistance.

1. There are multiple ways to complete and submit this survey. Please select the method most suitable for you:
 - a. Complete the survey and return via the provided self-addressed stamped envelope.
 - b. Visit [insert website] and enter your office's unique PIN provided on the bottom left of this survey.
 - c. Call (866) 582-4052 and complete the survey by phone.
2. Please answer all questions with reference to the public defender office specified above. If you are the head of more than one public defender office you should receive multiple solicitations for this survey; we ask that you fill out one instrument for each office. If you find you need more copies of the survey, please contact the CPDO team via email at CPDO@norc.org.
3. Answer the questions as accurately as possible given the organization and structure of your office. Estimates are allowed.

If you have questions or need assistance in completing the survey, please contact the CPDO team via email at CPDO@norc.org.

Burden Statement

This collection is authorized under 34 U.S.C. § 10132. Your participation is voluntary. BJS will use the information only for statistical purposes [34 U.S.C. § 10134]. BJS will protect personally identifiable information consistent with the confidentiality requirements in 34 U.S.C. § 10231 and 28 CFR Part 22. See the BJS Data Protection Guidelines (https://bjs.ojp.gov/sites/g/files/xyckuh236/files/media/document/bjs_data_protection_guidelines.pdf).

This collection has been approved by the Office of Management and Budget (OMB Number: 1121-0095 Approval Expires: TBD). If this number were not displayed, we could not conduct this survey. Your voluntary participation in this survey is important, however, you may decline to answer any or all questions. Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

You can contact the Bureau of Justice Statistics with questions or feedback at askbjs@usdoj.gov; by phone at 202-307-0765; or by mail: Bureau of Justice Statistics, 999 North Capitol Street NE, Washington, DC 20002.

Screener Questions

The first series of questions will confirm your office's eligibility for the census. Mark (X) only one choice per row.

- | | Yes | No |
|---|--------------------------|--------------------------|
| S1. Is your office supported, either partially or fully, by public funds? <i>Funding that comes from federal, state or local government, often collected through taxes and used toward public goods and services.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| S2. Does your office have at least one W-2 earning attorney? <i>A W-2 earning attorney is an attorney who is formally employed by a company or organization and who receives a W-2 tax form each year to report their income and taxes withheld.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| S3. Does your office provide public defense representation for adult or juvenile clients who are accused of a crime or delinquency, or accused in a trial court of violating conditions of a sentence? | <input type="checkbox"/> | <input type="checkbox"/> |
| S4. Does your office have a dedicated physical space? <i>A place that some or all staff may use for work.</i> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered 'No' to any S1 – S4, please stop here. Your office does not meet our eligibility criteria for this census, but we thank you for your time. If you have any questions about eligibility, or believe you were screened out in error, please contact cpdo@norc.org or 1-866-582-4052.

If all your answers to S1 - S4 were 'Yes', please continue the survey.

- | | Yes | No |
|---|--------------------------|--------------------------|
| S5. Is your office a for-profit private law firm? | <input type="checkbox"/> | <input type="checkbox"/> |
| S6. Does your office provide representation solely using an assigned counsel system? <i>An assigned counsel system provides representation using private attorneys who are not employed by the office, except possibly as contractors.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| S7. Is your office a tribal defender? <i>A tribal defender provides representation only to defendants in tribal justice systems.</i> | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered 'Yes' to any S5 – S7, please stop here. Your office does not meet our eligibility criteria for this census, but we thank you for your time. If you have any questions about eligibility, or believe you were screened out in error, please contact cpdo@norc.org or 1-866-582-4052.

If all your answers to S5 – S7 were 'No', please continue the survey.

Section A. General Information

A1. What is the geographic jurisdiction served by your public defender office? *Mark (X) only one.*

1 An entire state or United States territory.

2 Multiple counties or county equivalents, an entire judicial district or circuit larger than a single county. → Enter the names of the counties served.

3 An entire county or county equivalent

4 Part of a county (e.g., city or town) →

STOP HERE. Your office does not meet our eligibility criteria for this survey but we thank you for your time. If you have any questions about eligibility, or believe you were screened out in error, please contact cpdo@norc.org or 1-866-582-4052.

5 Other (please specify)

A2. Is your public defender office the primary office in your jurisdiction? *A 'primary office' is an office that is assigned more criminal and juvenile delinquency cases or other court-appointed cases than any other public defender office. Mark (X) only one.*

1 Yes

2 No

A3. Is your public defender office a conflict office? *A 'conflict office' is an office that is assigned cases when another public defender office has a conflict of interest. Mark (X) only one.*

1 Yes

2 No

A4. Which best describes your public defender office? Mark (X) only one.

- 1 Part of the state or county judicial branch
- 2 Part of the state or county executive branch
- 3 A nonprofit organization
- 4 Other (please specify)

A5. Is your office overseen or funded, in whole or in part, by a state or territory-level body? Mark (X) only one.

	Yes	No
Funded	<input type="checkbox"/>	<input type="checkbox"/>
Overseen	<input type="checkbox"/>	<input type="checkbox"/>

A6. Is your office overseen or funded, in whole or in part, by a body other than at the state or territory-level body? Mark (X) only one.

	Yes	No
Funded	<input type="checkbox"/>	<input type="checkbox"/>
Overseen	<input type="checkbox"/>	<input type="checkbox"/>

A7. Which of the following best describes the role of the non-state or territory-level body in the following decisions? Mark (X) only one choice per row.

	Is the final decision-maker	Has a limited (e.g., advisory) role	Has no role	Don't know
a. Determines attorney practice standards for the office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Determines the total amount of the office's budget	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Determines policy priorities for the office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A8. Who appoints the members of the non-state or territory-level body? Mark (X) only one choice per row.

	Yes	No	Don't know
a. Governor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. State Legislature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Supreme Court	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. County Commission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A9. Do any attorney or non-attorney staff in your office belong to a labor union with the right to engage in collective bargaining related to their public defense work?

- 1 Yes, some attorney and/or non-attorney staff belong to a labor union
- 2 No, no attorney and/or non-attorney staff belong to a labor union → **SKIP to A11**
- 3 I don't know → **SKIP to A11**

A10. Which of the following is allowable for your attorney and/or non-attorney staff regarding membership with a labor union?

- 1 Attorneys and non-attorneys can belong to the same labor union.
- 2 Attorneys and non-attorneys can belong to separate labor unions.
- 3 Only attorneys can belong to a labor union.
- 4 Only non-attorneys can belong to a labor union.
- 5 I don't know

A11. The reference period for this survey's questions about finances is fiscal year (FY) 2024. Please indicate your office's FY 2024. Mark (X) only one.

- 1 Calendar year (January 1, 2024-December 31, 2024)
- 2 July 1, 2023 to June 30, 2024
- 3 Other *If other, please indicate the dates below:*

Month ____ -Day ____ -Year ____

to

Month ____ -Day ____ -Year ____

USE THIS REFERENCE PERIOD FOR QUESTIONS THAT ASK ABOUT FY 2024

A12. In FY 2024, how much did your office spend (total operating expenditures) to provide criminal public defense services to defendants? That is, excluding any fixed capital costs, what were the total office expenditures for public defense functions during the year? Exclude building construction costs and major equipment purchases. If you are unable to provide the actual dollar amount, please provide your best estimate and mark (X) in the estimate check box.

TOTAL OPERATING EXPENDITURES:
\$ _____ .00

- 1 Estimate
- 2 Don't know → **SKIP to A14**

A13. What percentage of the total operating expenditures entered in A12 came directly from each of the following sources? If you are unable to provide the actual percentage, please provide your best estimate and mark (X) in the estimate check box. If none, enter "0".

Percentage Source	Percentage (%)	Est
a. State/U.S. Territory	<input type="text"/>	<input type="checkbox"/>
b. County	<input type="text"/>	<input type="checkbox"/>
c. City or town	<input type="text"/>	<input type="checkbox"/>
d. Federal government (including Byrne Justice Assistance Grants)	<input type="text"/>	<input type="checkbox"/>
e. Fees charged to clients for representation	<input type="text"/>	<input type="checkbox"/>
f. Other (please specify)	<input type="text"/>	<input type="checkbox"/>
<input type="text"/>		
100% TOTAL		

A14. Is the primary funding source for your public defender office an awarded contract? Mark (X) only one.

- 1 Yes
 2 No → **SKIP to B1**

A15. When your office first won the contract, was the process competitive? Mark (X) only one.

- 1 Yes
 2 No

Section B. Staffing

B1. Including the chief public defender, how many of the following types of paid employees worked in your public defender office on December 31, 2024?

'Chief public defender' is the individual designated as the chief executive of the office. "Part-time" refers to any individual who regularly works fewer hours than the office's standard work week. If you are unable to provide the actual number, please provide your best estimate and mark (X) in the estimate check box. If none, enter "0".

	Number of full-time	Est	Number of part-time	Est
a. Attorneys, including the chief public defender, with management or supervisory responsibilities over other attorneys	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
b. Attorneys with no management or supervisory responsibilities over other attorneys	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
Total attorneys (sum of rows a and b)	<input type="text"/>		<input type="text"/>	
c. Social workers (staff whose primary responsibility is to assess client needs, prepare reports, and refer to services, regardless of licensing credentials)	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
d. Investigators (staff whose primary responsibility is factual investigation of cases)	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
e. Paralegals	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
f. All other staff (including administrators, support staff, IT staff, human resources, and all others)	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>

What number of hours qualifies an attorney to be full-time?

B2. Of the sum of full-time attorneys (B1a and B1b) and sum of part-time attorneys (B1a and B1b) in your office on December 31, 2024, what was the breakdown of all attorney staff by sex? If you are able to provide estimated numbers only, please mark (X) in the estimate check box. If you are unable to provide any numbers, please check 'Unable to provide this information.' If none, enter "0".

	Number of full-time attorneys	Est	Number of part-time attorneys	Est
a. Female	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
b. Male	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>

B3. Of the sum of full-time attorneys (B1a and B1b) and sum of part-time attorneys (B1a and B1b) in your office on December 31, 2024, what was the breakdown of all attorney staff by race and/or ethnicity? If you are able to provide estimated numbers only, please mark (X) in the estimate check box. If you are unable to provide any numbers, please check 'Unable to provide this information.' If none, enter "0".

	Number of full-time attorneys	Est	Number of part-time attorneys	Est
a. White alone	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
b. Black or African American alone	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
c. Hispanic or Latino alone	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
d. American Indian or Alaska Native alone	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
e. Asian alone	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
f. Native Hawaiian or Pacific Islander alone	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
g. Middle Eastern or North African alone	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
h. Multiracial and/or Multiethnic	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
i. Not known	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>

B4. Of the sum of full-time attorneys (B1a and B1b) and sum of part-time attorneys (B1a and B1b) on staff, how many litigating attorneys worked in your public defender office on December 31, 2024? 'Litigating attorneys' carry a caseload. If you are unable to provide the actual number, please provide your best estimate and mark (X) in the estimate check box. If none, enter "0".

Number of full-time attorneys	Number of part-time attorneys
<input type="text"/> <input type="checkbox"/> Est	<input type="text"/> <input type="checkbox"/> Est

B5. Of the sum of B1a and B1b full-time attorneys, and sum of B1a and B1b part-time attorneys on staff, how many attorneys had been employed at your office for more than three years as of December 31, 2024? If you are unable to provide the actual number, please provide your best estimate and mark (X) in the estimate check box. If none, enter "0".

Number of full-time attorneys	Number of part-time attorneys
<input type="text"/> <input type="checkbox"/> Est	<input type="text"/> <input type="checkbox"/> Est

B6. Please enter the minimum and maximum annual salaries your office paid as of December 31, 2024 for staff in the following categories:

Category	Minimum	Maximum	No such persons
a. Attorneys with management or supervisory responsibilities over other attorneys	\$ _____ .00	\$ _____ .00	<input type="checkbox"/>
b. Attorneys with no supervisory responsibilities over other attorneys	\$ _____ .00	\$ _____ .00	<input type="checkbox"/>
c. Social workers (staff whose primary responsibility is to assess client needs, prepare reports, and refer to services, regardless of licensing credentials)	\$ _____ .00	\$ _____ .00	<input type="checkbox"/>
d. Investigators (staff whose primary responsibility is factual investigation of cases)	\$ _____ .00	\$ _____ .00	<input type="checkbox"/>
e. Paralegals	\$ _____ .00	\$ _____ .00	<input type="checkbox"/>

B7. How many staff in each category left your office at any time during calendar year 2024 (January 1, 2024 - December 31, 2024), regardless of the reason? If you are unable to provide the actual number, please provide your best estimate and mark (X) in the estimate check box. If none, enter "0".

Category	Number full-time		Number part-time	
a. Attorneys with management or supervisory responsibilities over other attorneys	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
b. Attorneys with no supervisory responsibilities over other attorneys	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
c. Social workers (staff whose primary responsibility is to assess client needs, prepare reports, and refer to services, regardless of licensing credentials)	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
d. Investigators (staff whose primary responsibility is factual investigation of cases)	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
e. Paralegals	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est

B8. How many staff in each category were hired at any time during calendar year 2024 (January 1, 2024 - December 31, 2024)? If you are unable to provide the actual number, please provide your best estimate and mark (X) in the estimate check box. If none, enter "0".

Category	Number full-time		Number part-time	
a. Attorneys with management or supervisory responsibilities over other attorneys	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
b. Attorneys with no supervisory responsibilities over other attorneys	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
c. Social workers (staff whose primary responsibility is to assess client needs, prepare reports, and refer to services, regardless of licensing credentials)	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
d. Investigators (staff whose primary responsibility is factual investigation of cases)	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
e. Paralegals	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est

B9. How many positions were vacant on December 31, 2024? 'Vacant' means that your office is authorized to hire for that position, but as of December 31, 2024, the position was not filled. If you are unable to provide the actual number, please provide your best estimate and mark (X) in the estimate check box. If none, enter "0".

Category	Number full-time		Number part-time	
a. Attorneys with management or supervisory responsibilities over other attorneys	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
b. Attorneys with no supervisory responsibilities over other attorneys	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
c. Social workers (staff whose primary responsibility is to assess client needs, prepare reports, and refer to services, regardless of licensing credentials)	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
d. Investigators (staff whose primary responsibility is factual investigation of cases)	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est
e. Paralegals	<input type="text"/>	<input type="checkbox"/> Est	<input type="text"/>	<input type="checkbox"/> Est

B10. In your jurisdiction who is the final authority in the selection of the chief public defender in your office?

Mark (X) only one.

- 1 State-level body
- 2 Chair of state-level body
- 3 Board or commission other than at state-level
- 4 State governor
- 5 Publicly elected
- 6 County executive
- 7 County legislature
- 8 County or district judiciary
- 9 Other (please specify):

B11. How long had the chief public defender in your office been in their position as of December 31, 2024? Write in years and months.

- a. _____ Years
- b. _____ Months
- c. N/A - position was vacant → **SKIP to B13**

B12. What was the annual salary of the chief public defender in your office on December 31, 2024?

TOTAL ANNUAL SALARY:

\$ _____ .00

B13. Is the current chief public defender in your office a litigating attorney? (Litigating attorneys carry a caseload.) Mark (X) only one.

- 1 Yes
- 2 No
- 3 NA - position is vacant → **SKIP to C1**

B14. Is the current chief defender full or part-time?

“Part-time” refers to any individual who regularly works fewer hours than the office’s standard work week. Mark (X) only one.

- 1 Full-time
- 2 Part-time

B15. What is the sex of the current chief defender?

Mark (X) all that apply.

- 1 Female
- 2 Male

B16. What is the race and/or ethnicity of the current chief public defender? Mark (X) all that apply.

- 1 White
- 2 Black or African American
- 3 American Indian or Alaska Native
- 4 Asian
- 5 Native Hawaiian or Other Pacific Islander
- 6 Middle Eastern or North African
- 7 Hispanic or Latino

Section C. Caseload

The reference period for this survey’s questions about cases is your office’s fiscal year (FY) 2024, defined in question A11.

C1. Did your office handle cases for court-appointed clients in the following categories?

Mark (X) only one choice per row.

- | | Yes | No |
|--|--------------------------|--------------------------|
| a. Capital felony (including death penalty-eligible cases not ultimately prosecuted as capital cases) | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Non-capital felony cases where life without parole is an available sentence (whether or not it is imposed) | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Non-capital felony cases where the maximum sentence is less than life without parole (including traffic felonies) | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Misdemeanors that carry a jail sentence (including misdemeanor traffic cases) | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Misdemeanors that do not carry a jail sentence (including fine-only traffic offenses) | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Ordinance/Municipal infraction or violation | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Violation/Revocation of probation or parole | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Sex offender registration and classification | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Criminal appeal | <input type="checkbox"/> | <input type="checkbox"/> |
| j. State post-conviction/habeas corpus | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Federal habeas corpus | <input type="checkbox"/> | <input type="checkbox"/> |
| l. Expungement of criminal record | <input type="checkbox"/> | <input type="checkbox"/> |
| m. Clemency or pardon | <input type="checkbox"/> | <input type="checkbox"/> |
| n. Juvenile delinquency | <input type="checkbox"/> | <input type="checkbox"/> |
| o. Juvenile delinquency appeals | <input type="checkbox"/> | <input type="checkbox"/> |
| p. Juvenile transfer/waiver hearings | <input type="checkbox"/> | <input type="checkbox"/> |
| q. Juvenile status offense (e.g., underage liquor law violation, truancy, etc.) | <input type="checkbox"/> | <input type="checkbox"/> |
| r. Termination of parental rights | <input type="checkbox"/> | <input type="checkbox"/> |
| s. Child protection/dependency cases (representing children) | <input type="checkbox"/> | <input type="checkbox"/> |
| t. Failure to pay child support | <input type="checkbox"/> | <input type="checkbox"/> |
| u. Child protection/dependency cases (representing parents, other than termination of parental rights) | <input type="checkbox"/> | <input type="checkbox"/> |
| v. Civil commitment of alleged sexually violent predators | <input type="checkbox"/> | <input type="checkbox"/> |
| w. Civil commitment (other than alleged sexually violent predators) | <input type="checkbox"/> | <input type="checkbox"/> |
| x. Other (please specify): | <input type="checkbox"/> | <input type="checkbox"/> |

C2. Criminal cases are often defined and counted differently across offices. Which of the following statements most closely reflects how your office counts a “case”? Mark (X) only one.

- 1 Every charge against every client is counted as a separate case.
- 2 Groups of charges against a client may be counted as single cases. (Groups of charges may be: charges arising from a single incident, charges contained in a single charging instrument, or charges contained in a single court docket)

C3. How many of the following types of cases did your office receive in your office’s FY 2024? If you are unable to provide the actual number, please provide your best estimate and mark the estimate box. If none, enter “0”.

Type of case	Number of cases	Est
a. Capital felony (including death penalty-eligible cases not ultimately prosecuted as capital cases)	<input type="text"/>	<input type="checkbox"/>
b. Non-capital cases where life without parole is an available sentence (where or not it is imposed)	<input type="text"/>	<input type="checkbox"/>
c. Non-capital felony cases where the maximum sentence is less than life without parole (including traffic felonies)	<input type="text"/>	<input type="checkbox"/>
d. Misdemeanors that carry a jail sentence (including misdemeanor traffic offenses)	<input type="text"/>	<input type="checkbox"/>
e. Misdemeanors that do not carry a jail sentence (including fine-only traffic offenses)	<input type="text"/>	<input type="checkbox"/>
f. Ordinance/Municipal infraction or violation	<input type="text"/>	<input type="checkbox"/>
g. Violation of probation or parole	<input type="text"/>	<input type="checkbox"/>
h. Criminal appeals	<input type="text"/>	<input type="checkbox"/>
i. Juvenile cases (including juvenile delinquency, delinquency appeals, and juvenile transfer/waiver hearings)	<input type="text"/>	<input type="checkbox"/>
j. All other cases (including civil commitment of alleged sexually violent predators, civil commitment other than alleged sexually violent predators, state post-conviction/habeas corpus, federal habeas corpus, juvenile status offenses, termination of parental rights, failure to pay child support, child protection/dependency cases representing children or parents, sex offender registration and classification, expungement of criminal record, clemency)	<input type="text"/>	<input type="checkbox"/>

If your responses to C3, b. and C3, c. regarding non-capital felony cases are both ‘0,’ skip to D1

C4. In non-capital felony cases, when is your office typically appointed to represent a client? Mark (X) only one.

- 1 BEFORE the client’s arrest and first court appearance. (A first court appearance occurs when a defendant is brought before a judge or judicial officer, is informed of charges against them, and their liberty may be subject to restriction.)
- 2 AT the client’s first court appearance
- 3 AFTER the client’s first court appearance
- 4 Other (please specify):

C5. In non-capital felony cases, how soon does a representative from your office (attorney, investigator, paralegal, etc.) typically first contact a client appointed to the office who is in custody? Mark (X) only one.

- 1 Before appointment
- 2 Immediately upon appointment (e.g., attorney is routinely present in court when client is appointed, and meets with client)
- 3 Not immediately, but within 24 hours of appointment
- 4 Later than 24 but within 48 hours of appointment
- 5 Later than 48 but within 72 hours of appointment
- 6 Later than 72 hours after appointment
- 7 Other (please specify):

C6. In non-capital felony cases, when does a representative from your office (attorney, investigator, paralegal, etc.) typically first contact a client appointed to the office who is not in custody? Mark (X) only one.

- 1 Before appointment
- 2 Immediately upon appointment (e.g., attorney is routinely present in court when client is appointed, and meets with client)
- 3 Not immediately, but within 24 hours of appointment
- 4 Later than 24 but within 48 hours of appointment
- 5 Later than 48 but within 72 hours of appointment
- 6 Later than 72 hours after appointment
- 7 Other (please specify):

C7. Which of the following best describes how non-capital felony cases are generally handled after your office is appointed? Mark (X) only one.

- ¹ Cases are handled by a single attorney from start to finish (vertical representation).
- ² Cases may be handled by one or more attorneys prior to arraignment, then assigned to a single attorney for the remainder of the case (vertical representation after arraignment only).
- ³ Cases may be assigned to different attorneys at various stages of the case after arraignment (horizontal representation).
- ⁴ Cases are assigned to either one or more attorneys depending on the type of charges filed
- ⁵ Other (please specify):

Section D. Eligibility for Services

D1. Is your office responsible for screening applications from defendants seeking court-appointed counsel? Mark (X) only one.

- ¹ Yes
- ² No
- ³ Not applicable - no screening process is used for persons seeking representation from our office. → **SKIP to D5**

D2. Which of the following information is used to assess whether a defendant is financially qualified to receive appointed counsel in your jurisdiction? Mark (X) only one choice per row.

	Considered	Some courts consider, others do not.	Not considered	Don't know
a. Applicant earns income from employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Applicant has outstanding debt (e.g., credit card, student loan)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Applicant is able to post financial bond	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Applicant is in custody (e.g., mental health facility, jail, juvenile or youth facility or other correctional institution)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Applicant lives in public housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Applicant must pay utility bills, rent, mortgage, or other fixed expenses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Applicant owns a car	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Applicant owns a house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Applicant receives needs-based public assistance (e.g., social security, TANF)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Assets or income of applicant's family members (e.g., spouse, parents)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Likely cost for applicant to hire own attorney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Number of dependents in applicant's family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Seriousness of charges against applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D3. In your jurisdiction, is there a standard income level above which applicants are generally denied court-appointed counsel?

- ¹ Yes
- ² No → **SKIP to D5**
- ³ Don't know → **SKIP to D5**

D4. As of December 31, 2024, what was the income limit below which an applicant for representation in a non-capital felony case with no dependents would routinely qualify for court-appointed counsel? Enter either a dollar amount or a percentage based on the Federal Poverty Line. If neither applies, please describe what is used.

- ¹ Income level: \$ _____ .00
- ² ____ % of the Federal Poverty Line
- ³ Other (please specify):

- ⁴ Don't know

D5. Which of the following fees can a client of your office be required to pay? Mark (X) only one choice per row.

	Yes	No	Don't know
a. Up-front application or administrative fee when requesting an attorney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Attorney cost recoupment after representation is ended (whether partial or full)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section E. Office Resources

E1. Does your office have policies in the following areas? Mark (X) only one choice per row.

	Yes, written policy	Yes, unwritten or informal policy	No policy
a. Attorney caseload limits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Attorney qualifications to take cases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Attorney supervision and/or mentoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Case file maintenance (e.g., timeliness of case closing, completeness of notes)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Client contact (e.g., frequency throughout the case)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Continuity (or 'verticality') of representation throughout case	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Determining a conflict of interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Information security (e.g., personally identifiable information (PII) or sensitive information)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Leave policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Performance reviews for attorney staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Performance reviews for non-attorney staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Remote work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Professional Development Policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Training of attorneys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Training of social workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Training of investigators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Use of social workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. Use of investigators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. Attorneys referring a client to outside organizations to help meet their civil or social service needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E2. Does your office provide either in-house Continuing Legal Education (CLE) for attorneys, or funding for attorneys to obtain CLE elsewhere? Mark (X) only one choice per row.

	Provided	Not provided	Don't know
a. In-house CLE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Funding for attorneys to obtain CLE elsewhere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E3. Does your office provide either in-house Continuing Education Units (CEUs) for social workers, or funding for social workers to obtain CEUs elsewhere? Mark (X) only one choice per row.

	Provided	Not provided	Don't know
a. In-house CEU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Funding for attorneys to obtain CEU elsewhere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E4. Does your office pay bar membership fees for staff attorneys? Mark (X) only one.

	Full-Time	Part-Time
Yes, for all	<input type="checkbox"/>	<input type="checkbox"/>
Yes, for some	<input type="checkbox"/>	<input type="checkbox"/>
No	<input type="checkbox"/>	<input type="checkbox"/>

E5. Does your office use an electronic case management system (CMS)? Case management systems are software packages that allow attorneys to keep track of data on clients and cases. For the purposes of this question, word-processing documents and spreadsheets (such as Excel) do not constitute a CMS. Mark (X) only one.

- 1 Yes
 2 No
 3 Don't know

E6. Indicate how easy it would be for your office to report the following data. Mark (X) only one choice per row.

	Data are easily reportable	Data would be difficult to report (e.g., time consuming and/or labor-intensive)	Could not report (e.g., data not available or accessible)
a. The office's total caseload	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The number of cases in which an attorney used the services of an investigator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The number of cases in which an attorney used the services of a social worker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The number of cases in which an attorney used the services of an expert witness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Number of cases by disposition (e.g., how many ended in dismissal, conviction, acquittal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The cost of providing representation in all cases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Demographic data on attorneys and other employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Demographic data on clients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Volume of digital discovery evidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E7. Do you have any system in your office that does the following? Mark (X) only one choice per row.

	Yes, and it meets our office's needs	Yes, but it doesn't meet our office's needs	No such system
a. Automatically transcribes speech in video evidence to text	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Generates form letters or emails to send to clients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Identifies conflicts of interest by checking names of parties in existing cases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Organizes client appointments and court dates into a calendar showing attorneys where they need to be	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Sends text message reminders to clients for court dates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Sends text message reminders to clients for appointments at the office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Stores all documents related to a case for easy reference	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Stores information about communication with client	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Tracks the amount of time that attorneys spend on a case	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E8. For FY 2024, indicate the types of digital evidence your staff reviewed and the devices where the evidence was stored. Mark (X) only one choice per row.

	Yes	No
Types of digital evidence reviewed		
a. Documents (e.g., notes, letters, articles, spreadsheets)	<input type="checkbox"/>	<input type="checkbox"/>
b. GPS and navigation system data	<input type="checkbox"/>	<input type="checkbox"/>
c. Social media posts, including audio and video files	<input type="checkbox"/>	<input type="checkbox"/>
d. Law enforcement body camera data	<input type="checkbox"/>	<input type="checkbox"/>
e. Audio files not including social media or body camera data	<input type="checkbox"/>	<input type="checkbox"/>
f. Video files not including social media or body camera data	<input type="checkbox"/>	<input type="checkbox"/>
g. Other type of digital/multimedia data (please specify):		
<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

Types of devices where digital evidence was stored		
a. Laptop or desktop computer	<input type="checkbox"/>	<input type="checkbox"/>
b. Thumb and external drives, CDs, DVDs or other media storage device	<input type="checkbox"/>	<input type="checkbox"/>
c. Cloud or external server	<input type="checkbox"/>	<input type="checkbox"/>
d. Traditional cellphone (not smartphone) device	<input type="checkbox"/>	<input type="checkbox"/>
e. Smartphone, tablet, or mobile device	<input type="checkbox"/>	<input type="checkbox"/>
f. Other type of digital/multimedia device (please specify):		
<input style="width: 100%;" type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>