

IN THE IOWA DISTRICT COURT FOR TAMA COUNTY

THE STATE OF IOWA

:
:
:
:
:
:

No. _____

vs.

WAIVER OF COUNSEL

Defendant.

COMES NOW the Defendant and states:

1. I understand that I am charged with the offense(s) of _____

contrary to Section(s) _____, which is punishable by a fine of up to \$ _____ plus 30% surcharge and/or confinement up to _____.

2. I understand that the Court will appoint an attorney to represent me if I qualify. However, I understand that I do not have to have an attorney if I do not wish one, and that I may represent myself on these charges.

3. I understand that I will be required to pay restitution for all costs and fees incurred for legal assistance.

4. I am aware that there may be defenses to criminal charges that may not be known to non-lawyers. I accept the risk that waiving counsel might result in a defense being overlooked. I know that by pleading guilty now without an attorney, I will be giving up the opportunity to get an independent opinion on whether it is wise to plead guilty, under the facts of my case and the law.

5. I understand that if I decide to represent myself, it is my obligation to know and understand court procedures and rules and that this Court cannot give legal advice or assistance to me concerning my defense or the trial of this matter.

6. I understand that if I am ever charged with a crime in the future, a conviction in this case may be used against me to increase the charge for the future crime and/or for sentencing for a future crime.

7. I have read the above-printed rights and warnings and have had them explained to me and I understand them.

8. I do not want to be represented by an attorney, but wish to represent myself on the charge(s) set forth above.

9. I do not want the Court to appoint an attorney for me.

10. I voluntarily execute this Waiver of Counsel on this ____ day of _____, 20____.

Defendant