

SUPERIOR COURT OF THE STATE OF WASHINGTON FOR WHATCOM COUNTY

vs Petitioner/Plaintiff Respondent/Defendant	No. MOTION & DECLARATION TO PROCEED IN FORMA PAUPERIS
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Official Use Only	AC Initial _____	Approved _____	Denied _____
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I. MOTION

Based on the declaration below, I move the court for an order allowing me to file this action without charge. The court may order me to pay the filing fee before the entry of the final order, if I am able to pay at that time. I declare that I am indigent as is shown by the declaration below.

II. DECLARATION

I am the Petitioner in this action. I submit this declaration in support of my motion to proceed in forma pauperis. I have No means to pay the filing fee in this action.

Name _____ Date of Birth _____
Address _____
City _____ State _____ Zip _____
Phone Number _____ Email Address _____

1. Place an "x" next to any of the following types of assistance you receive:

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Welfare | <input type="checkbox"/> Poverty Related Veterans' Benefits |
| <input type="checkbox"/> Food Stamps | <input type="checkbox"/> Temporary Assistance for Needy Families |
| <input type="checkbox"/> SSI | <input type="checkbox"/> Refugee Settlement Benefits |
| <input type="checkbox"/> Medicaid | <input type="checkbox"/> Other – Please Describe _____ |
| <input type="checkbox"/> GAU | |

(Supporting documentation for any assistance indicated above must be attached to this form.)

2. Have you ever served in the United States military? Yes No
3. Do you own a home? Yes No. If so, value: \$ _____ Amount owed: \$ _____

{If you marked an "x" anywhere in #1, please stop here and go to # 15 below.}

4. Including yourself, how many people in your household do you support? _____
5. Do you work or have a job? ___ Yes ___ No. If so, take-home pay per month: \$ _____
Occupation: _____ Employer's name & phone #: _____
6. Do you have a spouse or state registered domestic partner who lives with you? ___ Yes ___ No.
Does she/he work? ___ Yes ___ No. If so, take-home pay per month: \$ _____
Employer's name: _____
7. Do you have children residing with you? ___ Yes ___ No. If so, how many? _____
8. Do you and/or your spouse or state registered domestic partner receive unemployment, Social Security, a pension, or workers' compensation? ___ Yes ___ No.
If so, which one? _____ Amount per month: \$ _____
9. Do you receive money from any other source (include contributions for basic living expenses from any person that lives with you or family members other than a spouse or state registered domestic partner)? ___ Yes ___ No If so, how much? \$ _____
10. Do you own a vehicle(s)? ___ Yes ___ No. If so, year(s) and model(s) of your vehicle(s):
Vehicle 1: _____ Amount owed: \$ _____
Vehicle 2: _____ Amount owed: \$ _____
Vehicle 3: _____ Amount owed: \$ _____
11. How much money do you have in checking/saving account(s)? \$ _____
12. How much money do you have in stocks, bonds, or other investments? \$ _____
13. Other than routine living expenses such as rent, utilities, food, etc., do you have other expenses such as **child support** payments, **court-ordered** fines or **medical** bills, etc.? If so, describe:

14. Do you have money available to hire a private attorney? ___ Yes ___ No.

15. **Please READ, INITIAL AND SIGN the following:**

_____ (Initials) I understand the Court **REQUIRES** verification of the information provided in #1 on Page 1. I have attached supporting documentation and will report immediately any change in my financial status to the Court.

I certify under penalty of perjury under Washington State law that the above is true and correct. (Perjury is a criminal offense-see Chapter 9A.72 RCW)

Signature Date

Printed Name City/State