

**DISTRICT COURT OF WASHINGTON
FOR THE COUNTY OF CLARK**

STATE OF WASHINGTON /
CITY OF VANCOUVER /
CITY OF CAMAS /
CITY OF WASHOUGAL

Plaintiff,

vs.

Defendant

Case No(s).

**MOTION FOR PAYMENT REVIEW
OF LEGAL FINANCIAL
OBLIGATIONS IMPOSED AS A
CRIMINAL JUDGMENT**

I am the Defendant on the above case(s), and request as follows:

1. that, if applicable, my cases be removed from collections, that interest be waived, (except interest on restitution) and I be given a revised due date of _____. I will pay my court fines and fees in full by this date.
2. * that due to my inability to pay, my case(s) be removed from collections and that interest be waived, (except on interest on restitution); and
 - a. that I be allowed to make monthly payments of \$_____ to satisfy obligations that are not or cannot be converted to community restitution and I will pay balance due in full by the date of _____.
 - b. that some or all court costs and fines be **converted to community restitution** (consisting of either a community work program or community service at an approved Non-Profit) . I will contact Clark County District Court Customer Service on the ground floor of the Clark County Courthouse to enroll in the community restitution program if my request is approved, and I be given a revised due date of _____. I will perform Community Restitution services to be applied to my court fines and fees in full by this date.
3. * the court **waive** all eligible previously imposed legal financial obligations as my financial status based on my financial declaration makes payment improbable.
4. ** I wish to appear in Court to discuss this matter with a Judge. (I will be notified by mail of my court date.)
5. ** I waive my presence before a Judge and wish to receive the Court's decision by written response.

**** If requesting relief of obligations under #2 or #3, a Financial Declaration must be completed and included with this motion along with supporting documentation.***

***** You must indicate either #4 or #5.***

_____ Date _____
Defendant's Signature

Address: _____
Street City/State/Zip

Phone: _____ Email: _____

(optional) Alternate Contact: _____

Failure to provide adequate contact information could delay your ability to obtain relief from the court.

FINANCIAL DECLARATION

My current financial status is as follows (check all the boxes that apply to you):

MY INCOME

- Annual Income. My annual income is \$ _____.

- Spouse or partner living in the household. Monthly income is \$ _____.

- Others in household. I support _____ others in the household of which _____ are children. I pay/owe \$_____ in monthly child support.

- Employment.
My employer is _____.
I make \$ _____ per hour.
I work _____ hours per week.

- Public Assistance. I receive the following assistance –
 - Federal Supplemental Security Income (SSI)
 - Food Stamp Program (FSP)
 - Federal poverty-related veteran’s benefits
 - Aged, blind or disabled assistance benefits
 - Medical care services under RCW 74.09.035
 - Pregnant women assistance benefits
 - Refugee resettlement benefits
 - Medicaid
 - State-provided general assistance for unemployable individuals (GA-U or GA-X), my state benefits number is _____
 - Federal Temporary Assistance for Needy Families (TANF)

- Unemployed. I am unemployed. I have made these efforts to find a job–

I receive \$ _____ in unemployment weekly.

- Other Income. I receive this additional income (include amounts you have in cash, savings, checking, etc.) –

- Recent Court-Appointed Counsel. I was found to qualify for court-appointed counsel –
 - Less than 90 days from today’s date
 - Less than 180 days from today’s date, but more than 90 days from today’s date
 - Less than one year from today’s date, but more than 180 days from today’s date

- Efforts to Pay Fines. I have made these efforts to pay my fines –

Hardships (such as illness, jail, disability, family circumstances). I have the following hardships which prohibit me from performing Community Restitution to satisfy my Legal Financial Obligations:

Other Hardships: _____

DEBTS I OWE

Current Court-Ordered Legal Financial Obligations. I owe this amount of money to Washington courts (not including restitution) –

- Less than \$1,000
- \$1,000 to \$2,500
- \$2,500 to \$5,000
- \$5,000 to \$10,000
- More than \$10,000.

Current Restitution. I owe this court-ordered restitution –

- Less than \$1,000
- \$1,000 to \$2,500
- \$2,500 to \$5,000
- \$5,000 to \$10,000
- More than \$10,000.

Other Debts. I owe the following additional debts (include amount and explanation) –

\$ _____ for _____
\$ _____ for _____
\$ _____ for _____
\$ _____ for _____
\$ _____ for _____

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Dated – _____

City – _____

State – _____

Defendant's Signature

Please attach any documents verifying government assistance (i.e. TANF, SSI, SSD), or W2s, tax returns, etc. you would like the court to consider. If filed please use Sealed Financial Source Documents cover sheet. If scheduled for court hearing these items may also be brought to court.