

**Superior Court of Washington
For Spokane County**

Petitioner/Plaintiff,
vs.

Respondent/Defendant.

No. _____

**Motion and Declaration For Waiver of
Civil Filing Fees and Surcharges
(MTAF)**

Type of Action

- | | |
|---|--|
| <input type="checkbox"/> Dissolution/Legal Separation | <input type="checkbox"/> Third Party Custody |
| <input type="checkbox"/> Petition to Establish Residential Schedule | <input type="checkbox"/> Petition to Establish Paternity |
| <input type="checkbox"/> Civil Harassment Petition | <input type="checkbox"/> Modification of Parenting Plan Petition |
| <input type="checkbox"/> Waiver of Facilitator Surcharge | <input type="checkbox"/> Modification of Child Support Petition |
| <input type="checkbox"/> Other Civil Action _____ | |

I. MOTION

- 1.1 I am the petitioner/plaintiff respondent/defendant in this action.
- 1.2 I am asking for a waiver of all some filing fees and surcharges.

II. BASIS FOR MOTION

- 2.1. GR 34 allows the court to waive "filing fees or surcharges the payment of which is a condition precedent to a litigant's ability to secure access to judicial relief" for a person who is indigent. As outlined below, I am indigent.

Dated: _____

Signature of Requesting Party

Print or Type Name

III. DECLARATION

I declare that,

3.1 I cannot afford to meet my necessary household living expenses and pay the filing fees and surcharges imposed by the court. Please see the attached Financial Statement, which I incorporate as part of this declaration.

3.2 In addition to the information in the financial statement I would like the court to consider the following:

_____.

3.3 If you live with another adult, you must disclose their monthly income. \$_____ per month.

3.4 The other party to this case does does not have income. If the other party does have income, I believe that income is \$_____ per month.

(Check if applies.) I filed this motion by mail. I enclosed a self-addressed stamped envelope with the motion so that I can receive a copy of the order once it is signed.

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

Signed at (city) _____, (state) _____ on (date) _____.

Signature

Print or Type Name