

(Copy Receipt)

(Clerk's Date Stamp)

 <p><b>SUPERIOR COURT OF WASHINGTON COUNTY OF SPOKANE</b></p>
<p>Petitioner: _____</p> <p>vs.</p> <p>Respondent: _____</p>

CASE NO: \_\_\_\_\_

MOTION AND DECLARATION FOR  
ASSIGNMENT OF LAWYER

(MTAF)

**I. MOTION**

- 1.1 I, the undersigned:  Petitioner  Respondent in this matter moved the court for an order appointing a lawyer to represent me at public expense;
- 1.2 The following declaration is made in support of this motion.
- 1.3 I UNDERSTAND THAT ANY STATEMENT THAT I MAKE IN THE FOLLOWING DECLARATION MAY BE USED AGAINST ME.

**II. DECLARATION**

I declare under penalty of perjury under the laws of the State of Washington that the following is true and correct.

- 2.1 I am  the Respondent  the Petitioner I this matter;
- 2.2 I want a lawyer to represent me in this matter;
- 2.3 I am financially unable to obtain the services of a lawyer without causing substantial hardship to myself of my family;

2.4 I declare under penalty of perjury that the following information is true and intended to be relied upon by the court and other persons or agencies in determining my eligibility for legal services to be furnished me at public expense.

### III. FINANCIAL STATEMENT

#### 3.1 General Information

(a) Name: \_\_\_\_\_ (c) Social Security No.: \_\_\_\_\_

(b) Address: \_\_\_\_\_ (d) Telephone No.: \_\_\_\_\_

City/State \_\_\_\_\_ (e) Date of Birth: \_\_\_\_\_

(f) Marital Status:

Married  \_\_\_\_\_  
Divorced  \_\_\_\_\_  
Separated  \_\_\_\_\_  
Single  \_\_\_\_\_

(g) Persons whom you financially support: List children's names, ages, and if different, address:

Spouse  \_\_\_\_\_  
Children  \_\_\_\_\_  
Other  \_\_\_\_\_

(h) Are you presently employed?

Yes  No

Name and address of employer, or if currently unemployed, prior employer:

Length of employment: \_\_\_\_\_

Occupation: \_\_\_\_\_

(i) Is spouse employed?

Yes  No

Name and address of employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

3.2 INCOME AND ASSETS

(a) Gross monthly income \_\_\_\_\_

(personal)  
(b) Gross monthly income \_\_\_\_\_

(spouse)

(c) Other income \_\_\_\_\_

(d) Cash:  
Savings account \_\_\_\_\_  
Checking account \_\_\_\_\_  
On hand \_\_\_\_\_

(e) Home-cash value less amount owing \_\_\_\_\_

(f) Auto-cash value less amount owing (list make & year) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(g) Furniture (approximate value) \_\_\_\_\_

(h) Notes, mortgages, trusts, deeds \_\_\_\_\_

(i) Stocks, bonds (approximate value) \_\_\_\_\_

(j) Other assets and property \_\_\_\_\_

(k) Any indebtedness owed to you \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

3.3 EXPENSES AND DEBTS

(a) Monthly living expenses \_\_\_\_\_

(itemize)  
Rent or Mortgage \_\_\_\_\_

Food \_\_\_\_\_

Utilities \_\_\_\_\_

Transportation \_\_\_\_\_

Installment payments \_\_\_\_\_

Medical & dental \_\_\_\_\_

Insurance \_\_\_\_\_

Other \_\_\_\_\_

(b) Debts:  
Name/creditor Amount owed

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_