



**King County**  
**Department of Judicial Administration**  
 Catherine Cornwall, Director and Superior Court Clerk  
 (206) 296-9300 (206) 296-0100 TTY/TDD

**FINANCIAL DECLARATION-DECLARATION OF FACTS-PAYMENT AGREEMENT**

INSTRUCTIONS: Please complete and bring this form to your Review. Please be prepared to provide documents regarding your income and expenses. Bring documentation of the following items for the past three months: pay stubs, benefit award letters, current year Federal Tax Return, bank statements, lease/mortgage agreements, child support orders, utility statements, and any other financial documents indicating expenses or income.

**CASE NO. :** \_\_\_\_\_

**DEFENDANT NAME:** \_\_\_\_\_

**GROSS MONTHLY INCOME**

Defendant \$ \_\_\_\_\_  Weekly  Biweekly  Monthly

Spouse \$ \_\_\_\_\_  Weekly  Biweekly  Monthly

\*Children's Income: \_\_\_\_\_ \*Allotments \_\_\_\_\_

\*Retirement: \_\_\_\_\_ \*Welfare Aid/Public Aid \_\_\_\_\_

\*Social Security: \_\_\_\_\_ \*Child Support \_\_\_\_\_

\*Veterans Benefits: \_\_\_\_\_ \*Other Income \_\_\_\_\_

**TOTAL GROSS INCOME:** \_\_\_\_\_

PAY DAY (circle one)

M T W TH F S

M T W TH F S

**FIXED MONTHLY EXPENSES**

Food \_\_\_\_\_ House Insur. \_\_\_\_\_ Utilities: Gas & Electricity \_\_\_\_\_ Misc. \_\_\_\_\_

\*Rent/Payment \_\_\_\_\_ Auto Insur. \_\_\_\_\_ Water & Sewer \_\_\_\_\_ Cable \_\_\_\_\_

Maintenance \_\_\_\_\_ Health Insur. \_\_\_\_\_ Telephone \_\_\_\_\_

Real Estate tax \_\_\_\_\_

Do you pay child support? YES  NO  Amount per month: \_\_\_\_\_ Do you receive public aid? YES  NO  Amount per month: \_\_\_\_\_

**List All Monthly Installments You Are Paying**

| Name/Address of Finance Co./Bank/Other Creditors | Value | Balance | Monthly Payment | Description |
|--|-------|---------|-----------------|-------------|
| MORTGAGE   |       |         |                 |             |
| 2 <sup>ND</sup> MORTGAGE                         |       |         |                 |             |
| CREDIT CARDS                                     |       |         |                 |             |
| AUTO Yr. Make                                    |       |         |                 |             |
| AUTO Yr. Make                                    |       |         |                 |             |
| Other (Personal)                                 |       |         |                 |             |
| Boats, Trailers, etc.                            |       |         |                 |             |
| *Checking Account #                              |       |         |                 |             |
| *Savings Account #                               |       |         |                 |             |
| *Stocks, Bonds, etc.                             |       |         |                 |             |

**TOTAL MONTHLY EXPENSES:** \_\_\_\_\_

**PAYMENT AGREEMENT**

(Official Use Only)  
 I understand that under the provisions of RCW 9.94A, I am subject to all conditions and requirements the Court and the King County Superior Court Clerk's Office (DJA) may impose. Furthermore, I understand that I must comply with the instructions of the DJA-LFO Clerk and that I must provide any documentation requested by a DJA-LFO Clerk. Should I violate any of these conditions, requirements or instructions, I understand that I may be brought before the court for a hearing and/or imposition of additional sanctions.

**Instructions:**

- I am required to make minimum monthly payments to the King County Superior Court Clerk's Office.
- I am required to report any change of address to a DJA-LFO Clerk located in the Clerk's Office.
- Failure to make payments or report and address change and/or provide a valid address may result in further legal proceedings.

I agree to pay no less than \$ \_\_\_\_\_ per month beginning \_\_\_\_\_ to the King County Superior Court Clerk's Office, located at 516 Third Avenue, Room E609, Attn: Cashiers, Seattle, WA 98104 until my financial obligation is paid in full.

Defendant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

LFO Signature \_\_\_\_\_ Date: \_\_\_\_\_

**King County Courthouse:**  
 516 Third Avenue Room E609  
 Seattle, WA 98104-2386

**Maleng Regional Justice Center:**  
 401 Fourth Avenue North Room 2C  
 Kent, WA 98032-4429

**Clark Children & Family Justice Center:**  
 1211 East Alder Room 3015  
 Seattle, WA 98122-5598

