Superior Court of the State of Washington

For the County of King

FAMILY COURT SERVICES, ADOPTIONS UNIT

516 3^{ra} Avenue, W-280 Seattle, WA 98104 (206) 477-1500

Date:		
	Family Court Services No.:	
	Superior Court Cause No.:	
RE:		
Dear Client:		
We write in response to your request for a fee	e reduction / waiver regarding	the confirmation proce
Please complete the enclosed Financial State	ement and return it to our office	ce immediately; along
with a personal letter stating your reason for r	equesting a fee adjustment.	
You must also include <u>current income verifica</u>	ation along with your <u>persona</u>	l letter and the
Financial Statement. You may use one of the	e following forms of income ve	erification:
1. Your last two pay stubs		
 DSHS Award Letter and/or Cour Unemployment Benefits Notice 	t Order Waiving Filing Fees	
4. Last year's W-2 Form (Tax retur	ns are not acceptable.)	
5. Child Support Order (if applicable Company of Declaration	•	::
6. Financial Declaration WPF DRPSCU	01.1550 (Original must be filed	in your legal file.)
We cannot process your request until all d	locuments are completed a	nd returned.
Sincerely,		
Adoption Paralegal		
Family Court Services		
Enclosure		

All information must be completed in order to process. Your request will not be considered if the information is not complete.

FEE REDUCTION / WAIVER REQUEST

Name:		F	lome Phone:		
Address:			Work Phone:		
City:	State: Z		ile/Message:		
Employer:					
Employer Address					
Full Time:	Part Time:	Number of hours w	orked per week:		
Gross pay per mor	nth: \$	Net pay per month: \$			
If unemployed:		A. Date of I	ast employment:		
B. Reason:					
C. If termination, re	eason:				
The following peo	ople live with me: (ad	ults and minors)			
A. Name:	Relationship:	Age:	Monthly Income:		
B. Name:	Relationship:	Age:	Monthly Income:		
C. Name:	Relationship:	Age:	Monthly Income:		
D. Name:	Relationship:	Age:	Monthly Income:		
E. Name:	Relationship:	Age:	Monthly Income:		
PERSONAL LETT	ER		You may attach a separate letter.		

Why are you requesting for an adjustment of your fee?

FINANCIAL STA	TEMENT				FUS	NO.:	
My monthly expenses are:				I owe the following debt(s):			
Rent/Mortgage:	\$			Creditor:			
Food:	\$			Mo. Pymt.: \$	В	alance:	\$
Utilities:	\$			Creditor:			
Car(s):	\$			Mo. Pymt.: \$	В	alance:	\$
Gas:	\$		<u></u>	Creditor:			
Medical/Dental:	\$		<u></u>	Mo. Pymt.: <u>\$</u>	В	alance:	\$
Day Care:	\$		<u></u>	Creditor:			
Phone/Cell:	\$		<u></u>	Mo. Pymt.: <u>\$</u>	В	alance:	\$
Tuition:	\$ \$ \$			Creditor:			
Insurance:	\$			Mo. Pymt.: \$	B	alance:	\$
Other (explain):	\$			Creditor:			
	\$			Mo. Pymt.: <u>\$</u>	B	alance:	\$
Total Montly Ex	penses:	\$		Total Montly D	ebts:	\$	
My assets and e	equity valu	ues are:					
Home:		\$					
Checking Accour	nt(s):	\$					
Saving Account(s):	\$					
Automobile (indic	cate make	and year for e	each):				
Make			Year:		Value:	\$	
Make	· ·		Year:		Value:	\$	
Make	· ·		Year:		Value:	\$	
Cash on hand:		\$					
Retirement:		\$					
401K:		\$					
Other (itemize):				<u>\$</u> \$		_	
						_	
Total Assets an	d Equity V	/alues:	\$				