

King _____ Court of Washington For Sanderson Vs Sanderson _____	
Bovo, Angela _____ Petitioner/Plaintiff,	No. 962561 _____ Order Re Waiver of Civil Fees and Surcharges <input type="checkbox"/> Granted (ORPRFP) <input type="checkbox"/> Denied (ORDYMT) <input type="checkbox"/> Clerk's Action Required 3.1
vs. Sanderson, Zane _____ Respondent/Defendant.	

I. Basis

The court received the motion to waive fees and surcharges filed by or on behalf of the
x petitioner/plaintiff respondent/defendant.

II. Findings

The Court reviewed the motion and supporting declaration(s). Based on the declaration(s) and any relevant records and files, the Court finds:

- 2.1 x The moving party is indigent based on the following: He or she:
- is represented by a qualified legal aid provider that screened and found the applicant eligible for free civil legal aid services; and/or
 - receives benefits from one or more needs-based, means-tested assistance programs; and/or
 - x has household income at or below 125% of the federal poverty guideline; and/or
 - x has household income above 125% of the federal poverty guideline but cannot meet basic household living expenses and pay the fees and/or surcharges; and/or
 - x other: Is medically recommended access to representation, and no such service in the community exists. _____

Supreme Court of Washington
For Sanderson vs Sanderson _____

Bovo, Angela _____

Petitioner/Plaintiff,

vs.

Sanderson, Zane _____

Respondent/Defendant.

No.
962561 _____

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

I. Motion

- 1.1 I am the x petitioner/plaintiff respondent/defendant in this action.
- 1.2 I am asking for a waiver of fees and surcharges under GR 34.

II. Basis for Motion

- 2.1. GR 34 allows the court to waive “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: _____

Electronically signed _____
Signature of Requesting Party

Angela Bovo _____
Print or Type Name

III. Declaration

I declare that,

- 3.1 I cannot afford to meet my necessary household living expenses and pay the 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:

The opposing party has not complied with the parenting plan or trial court order. All financial costs of travel have paid for by me, where we were to shared the costs. Additionally The opposing party has instigated new litigation the Cook Islands by which to alienate child from petitioner, to continue to abuse the use of conflict and them portray himself as the victim. The petitioner has been obligated to pay for these additional costs of litigation as well as international travel.

(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

CLERK				Financial Statement (Attachment)			
1. My name is: ANGELA Bovo							
2. <input type="checkbox"/> I provide support to people who live with me: How many? 1 Age(s):							
3. My Monthly Income:0				6. My Monthly Household Expenses:			
Employed <input type="checkbox"/> Unemployed <input type="checkbox"/>				Rent/Mortgage:		\$0	
Employer's Name: Math Wizards				Food/Household Supplies:		\$0	
Gross pay per month (salary or hourly pay):		\$		Utilities:		\$0	
Take home pay per month:		\$		Transportation:		\$0	
4. Other Sources of Income Per Month in my Household:				Ordered Maintenance actually paid:		\$0	
Source:	Friends	\$ Room and Board		Ordered Child Support actually paid:		\$75	
Source:	Friends	\$Meals		Clothing:		\$0	
Source:		\$		Child Care:		\$0	
Source:		\$		Education Expenses:		\$0	
Sub-Total:		\$0		Insurance (car, health):		\$0	
<input type="checkbox"/> I receive food stamps.				Medical Expenses:		\$0	
Total Income, lines 3 (take home pay) and 4:		\$0		Sub-Total:		\$0	
5. My Household Assets:				7. My Other Monthly Household Expenses:			
Cash on hand:		\$ 5.00		CHILD SUPPORT		\$75	
Checking Account Balance:		\$ 0		LEGAL FEES		\$10	
Savings Account Balance:		\$0		DIVORCE DEBT		\$	
Auto #1 (Value less loan):		\$0				\$	
Auto #2 (Value less loan):		\$0		Sub-Total:		\$	
Home (Value less mortgage):		\$ 0		8. My Other Debts with Monthly Payments:			
Other:		\$0				\$ /mo	
Other:		\$				\$ /mo	
Other:		\$				\$ /mo	
Other:		\$				\$ /mo	
Other:		\$		Sub-Total:		\$	
Total Household Assets:		\$0		Total Household Expenses and Debts, lines 6, 7, and 8:		\$	
Date: 9/18/2018				Signature:			

King _____ Court of Washington
For Sanderson Vs Sanderson KNA Bovo

Bovo, Angela _____
Petitioner/Plaintiff,
vs.
Sanderson, Zane _____
Respondent/Defendant.

No. 962561 _____

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

I. Motion

On behalf of the x petitioner/plaintiff respondent/defendant, I am asking for a waiver of fees and surcharges under GR 34.

I base this motion on GR 34(a) and the declaration, below.

Dated: _____

Signature of Lawyer WSBA No.

Angela Bovo _____
Print or Type Name

II. Declaration

I declare that,

2.1 I represent the x petitioner/plaintiff respondent/defendant.

2.2 I am an attorney working with _____, which is a Qualified Legal Services Provider (QLSP) as defined by the Washington State Bar Association in APR 8(e)(2).

2.3 I am working with the QLSP as an:

attorney employed by the QLSP, or

attorney working in conjunction with the QLSP.

2.4 The QLSP screened the petitioner/plaintiff respondent/defendant and found the litigant eligible for free civil legal aid services.

x (Check if applies.) I filed this motion by email. I enclosed a self-addressed stamped envelope for timely return of a conformed copy of the order.

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

Signed at (city) Seattle, _____, (state) WA _____ on (date)
9/13/2018 _____.

Signature of Lawyer

WSBA No.

Angela Bovo _____
Print or Type Name

ANGELA BOVO - FILING PRO SE

September 14, 2018 - 9:29 AM

Transmittal Information

Filed with Court: Supreme Court
Appellate Court Case Number: 96256-1
Appellate Court Case Title: Angela Sanderson n/k/a Angela Bovo v. Zane Sanderson
Superior Court Case Number: 10-3-05248-1

The following documents have been uploaded:

- 962561_Motion_20180914092806SC657851_3449.pdf
This File Contains:
Motion 1 - Waive
The Original File Name was 5 Fee Waiver.pdf
- 962561_Motion_20180914092806SC657851_6826.pdf
This File Contains:
Motion 3 - Declaration in Support of Motion
The Original File Name was 3 Financial Statement.pdf
- 962561_Motion_20180914092806SC657851_8363.pdf
This File Contains:
Motion 2 - Waive Filing Fee
The Original File Name was 2 Fee Waiver.pdf
- 962561_Other_20180914092806SC657851_5681.pdf
This File Contains:
Other - fee
The Original File Name was 1 fee waiver.pdf

A copy of the uploaded files will be sent to:

- v@vfreitaslaw.com

Comments:

Sender Name: Angela Bovo - Email: angbovo@gmail.com
Address:
222 SW 292 ST
Federal WAY, WA, 98023
Phone: (425) 753-1966

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