Superior Court of Washington, County of _____

State of Washington, Plaintiff, vs. _____, Defendant. SID: If no SID, use DOB:	**Criminal Case No**.:_____ **Civil Case No**.:_____ **[ ] Motion for Certificate and Order of Discharge (MTCORD)** **[ ] Motion for Certificate and Order of Discharge and <u>Petition</u> for Issuance of a Separate No-Contact Order (MCORDPN)** **Clerk's Action Required**: **[ ] Filing fee received for civil case number**

Note to defendant*: A Certificate and Order of Discharge does not remove a criminal Conviction from your record. It does not remove any restrictions on the ownership, possession, or control of firearms/ammunition under state/federal law. A Certificate and Order of Discharge does not terminate your obligation to comply with a no-contact order that excludes or prohibits you from having contact with a specified person or coming within a set distance of any specified location, or your obligation to register as a sex or kidnapping offender.*

I, _____ (*name of defendant*) ask the court for a
Certificate and Order of Discharge [ ] and *Petition for Issuance of a Separate No-Contact Order* under RCW 9.94A.637.

As provided in the Confirmation of Court-Ordered Requirements on page **3**:

1. [ ] On _____ (*date*), I completed all of the sentencing conditions imposed on me by the court in the judgment and sentence in this case, including the payment of any and all legal financial obligations (LFOs) which are not expired under statute. RCW 9.94A.637(3).
[ ] My LFO's expired on (*date*) _____.

2. [ ] I have verified that I completed all nonfinancial sentencing conditions imposed by the court in the *Judgment and Sentence* in this case. RCW 9.94A.637(4).

or

[ ] I cannot verify I completed all nonfinancial sentencing conditions imposed by the court in the *Judgment and Sentence* in this case, and the court should waive the verification requirement because:

_____

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_____

_____

_____

_____

(RCW 9.94A.637(4))

If I am subject to a no-contact order that was written as part of and included in the judgment and sentence, I petition the court to reissue the no-contact order separately for the remaining term and under the same conditions as contained in the judgment and sentence. I understand that I must pay the filing fee for the separate no-contact 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*) _____, (*state*) _____ on (*date*) _____.

_____   _____
Signature of Defendant   Print or Type Name

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Confirmation of Court-ordered Requirements:

I have checked the Department of Corrections records and the records show that the defendant [ ] has [ ] has **not** satisfactorily completed all court-ordered sentencing conditions.

[ ] Community custody was completed on _____ (*date*) or if not ordered, full and partial confinement was completed on _____ (*date*).

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 of Community Corrections Officer   Print Name

<div align="center">OR</div>

I am submitting the following materials to show that I have completed the conditions in the *Judgment and Sentence*, such as community service hours and substance evaluation/treatment (include dates):

_____

_____.

(attach copies to this document.)

[ ] I completed community custody on _____ (*date*)

[ ] or if not ordered, I completed full and partial confinement on _____ (*date*).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 of Defendant Pro Se/   Print Name
Attorney for Defendant/WSBA No.

<div align="center">AND</div>

Confirmation of Legal Financial Obligations and Restitution (LFO):
I have checked the clerk's financial records and the records show that the defendant:

    [ ] has **not** paid any and all (*check all that apply*):

        [ ] LFOs
        [ ] restitution.

    [ ] has paid all LFOs and restitution. Judgement was satisfied on (*date*) _____.

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 of (Deputy) Clerk- Finance section   Print Name

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