**Superior Court of Washington, County of** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***华盛顿州 县高等法院***

|  |  |
| --- | --- |
| **State of Washington**, Plaintiff,  ***华盛顿州****，原告，*  vs.  *诉*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,  Defendant.  *被告。*  SID:  *SID：*  If no SID, use DOB:  *如果没有SID，则使用DOB：* | **Criminal Case No**.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***刑事案件编号****：*  **Civil Case No**.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***民事案件编号****：*  **[ ] Motion for Certificate and Order of Discharge (MTCORD)**  ***释放证明和命令(MTCORD)申请***  **[ ] Motion for Certificate and Order of Discharge and Petition for Issuance of a Separate No-Contact Order (MCORDPN)**  ***释放证明和命令申请以及签发单独的禁止接触令的请求(MCORDPN)***  **Clerk’s Action Required**:  ***书记员需要采取的行动：***  **[ ] Filing fee received for civil case number**  ***已收到以下民事案件编号的立案费*** |

***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.*

***致被告：****释放证明和命令不代表会从您的记录中删除刑事定罪。它不会解除根据州法或联邦法对枪支/弹药的所有权、持有或控制的限制。释放证明和命令不终止遵守排除或禁止您与特定人员接触或进入任何特定位置的设定距离内的禁止接触令的任何义务，也不会解除您作为性犯罪或绑架犯罪者的登记义务。*

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.

*我，*   *（被告姓名）根据RCW 9.94A.637向法院请求出具释放证明和命令 [-] 以及签发单独的禁止接触令的请求。*

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

*根据第3页的法院命令要求确认：*

**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).

*在*   *（日期），我完成了法院在本案判决和量刑中对我施加的所有量刑条件，包括所有未因法律失效而终止的法律经济义务(LFO)。RCW 9.94A.637(3)。*

[ ] My LFO’s expired on *(date)* .

*我的LFO已终止（日期）*

**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).

*我已核实，我完成了法院在本案判决和量刑中对我施加的所有非经济量刑条件。RCW 9.94A.637(4)。*

*or*

*或者*

[ ] 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:

*我无法核实我是否完成了法院在本案判决和量刑中对我施加的所有非经济量刑条件，法院应豁免核实要求，因为：*

(RCW 9.94A.637(4))

*(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.

*如果我受到一项作为判决和量刑一部分的禁止接触令的约束，我请求法院在剩余期限内，根据判决和量刑中包含的相同条件，重新单独颁发该禁止接触令。我明白我必须支付单独的禁止接触令的立案费。*

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

*本人特此声明，以上陈述属实且正确。若有不实之词，愿依照华盛顿州法律而接受伪证罪处罚。*

Signed at (c*ity*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (*state*) \_\_\_\_\_\_\_\_\_ on (*date*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

*签署地点（城市）*  *，（州）*   *（日期）*

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

Signature of Defendant Print or Type Name

*被告签名*  *请工整填写或键入姓名*

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**Confirmation of Court-ordered Requirements**:

***法院命令要求确认****：*

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.

*我已查看了教管部的记录，记录显示被告 [-] 已[-]* ***未****圆满地完成法院下令的所有量刑条件。*

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

*社区羁押于*   *（日期）完成或者如果没有下令，则全部和部分监禁已于*   *（日期）完成。*

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

*本人特此声明，以上陈述属实且正确。若有不实之词，愿依照华盛顿州法律而接受伪证罪处罚。*

Signed at (*city*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (*state*) \_\_\_\_\_\_ on (*date*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

*签署地点（城市）*  *，（州）*   *（日期）*

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

Signature of Community Corrections Officer Print Name

*社区矫正人员签名* *请工整填写姓名*

**OR**

***或者***

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):

*我提交以下材料以证明我已完成判决和量刑中的各项条件，例如社区服务小时数以及物质滥用评估/治疗（附上具体日期）：*

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(attach copies to this document.)

*（附上本文档的副本。）*

[ ] I completed community custody on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*date*)

*我于*   *（日期）完成了社区羁押，*

[ ] 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.

*或如果没有下令，则全部和部分监禁已于*   *（日期）完成。本人特此声明，以上陈述属实且正确。若有不实之词，愿依照华盛顿州法律而接受伪证罪处罚。*

Signed at (*city*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (*state*) \_\_\_\_\_\_\_\_ on (*date*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

*签署地点（城市）*  *，（州）*   *（日期）*

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

Signature of Defendant Pro Se/ Print Name

Attorney for Defendant/WSBA No. *请工整填写姓名*

*被告本人签名/*

*被告律师/WSBA编号*

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**AND**

***及***

**Confirmation of Legal Financial Obligations and Restitution (LFO)**:

***法定财务义务和赔偿(LFO)确认****：*

I have checked the clerk’s financial records and the records show that the defendant:

*我查看了书记官的财务记录，记录显示被告：*

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

***尚未****支付任何及全部费用（请勾选所有适用项）：*

[ ] LFOs

*LFO*

[ ] restitution.

*赔偿金。*

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

*已支付所有LFO和赔偿金。判决于以下日期得到履行（日期）*

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

*本人特此声明，以上陈述属实且正确。若有不实之词，愿依照华盛顿州法律而接受伪证罪处罚。*

Signed at (*city*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (*state*) \_\_\_\_\_\_\_\_ on (*date*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

*签署地点（城市）*  *，（州）*   *（日期）*

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

Signature of (Deputy) Clerk- Finance section Print Name

*财务部门（副）书记官签名* *请工整填写姓名*