

**SUPPORT STATEMENT**

RE: \_\_\_\_\_  
Defendant

*Fill this declaration out if the defendant is living with you and you completely support him/her without having them contribute to the basic household expenses. Statement must include the address and telephone number of the person signing the statement. You must fill out the itemized list of support below.*

***This is a declaration and signed under penalty of perjury.***

I certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct:

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

**THE COSTS FOR DEFENDANT TO LIVE WITH YOU ARE:**

Room/Board: \$ \_\_\_\_\_  
Food: \$ \_\_\_\_\_  
Transportation: \$ \_\_\_\_\_  
(Gas/Bus Fare)  
Electricity: \$ \_\_\_\_\_  
Phone: \$ \_\_\_\_\_  
Other (Please Explain below) \$ \_\_\_\_\_

\_\_\_\_\_

TOTAL \$ \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNED AT: \_\_\_\_\_  
(city) (state)

\_\_\_\_\_  
SIGNATURE

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_