

CLARK COUNTY SUPERIOR COURT
COLLECTIONS UNIT
500 West 8th Street, Suite 50
Vancouver, Washington 98660
360-397-6085

FINANCIAL ASSESSMENT FORM

Cause No. _____

(Please complete all information and please print legibly)

NAME _____
Last First Middle Nickname

OTHER NAMES USED (Maiden) _____

Street Address _____
Street Number and Name Apt. City State Zip

Mailing Address _____
P. O. Box or Street Apt. City State Zip

Phone _____ If no phone, number where you can be reached and whom _____

Cell Phone _____ Email Address _____

Race _____ Sex _____ Ht _____ Wt _____ Color Eyes _____ Color Hair _____

Date of Birth _____ Drivers License or ID No. _____ Social Security No. _____

Married Single Separated Divorced _____ ; _____ Education (Grade Level Completed)

Spouse's Name _____
Last First Middle Nickname

Spouse's Address & Phone _____
(if different) Street Address City & State Zip Phone Number

Nearest Relative NOT Residing With You _____ Relationship _____

Relative's Address & Phone _____
Street Address City & State Zip Phone Number

List of Names, Addresses & Phone Numbers of Two (2) Personal References NOT Related to You:

Name Street Address Apt. City & State Zip Phone Years Known

Name Street Address Apt. City & State Zip Phone Years Known

Expenses/Liabilities

Number of Children in Household _____ Age of Each Child _____

Other than yourself or above children, do you have any other dependents you directly support?
____ Yes ____ No If yes, whom and relation _____

If Day Care, Name of Day Care and Expense _____

Automobiles

Year	Make	Model	Year	Make	Model
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Vehicle Loan Balances \$ _____ Monthly Payment \$ _____

Please list all of your Creditors (Credit Card Accounts, Finance Companies, Banks, etc.) Use a separate sheet of Paper if needed.

Company Name	Balance	Monthly payment
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Company Name	Balance	Monthly Payment
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Company Name	Balance	Monthly Payment
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Are you on probation or parole? Yes No

Probation/parole Officer _____ Phone _____

Monthly probation fee \$ _____ LFO/Restitution Payments \$ _____

Are you presently on bond from a jail? Yes No

Name of bonding company _____ County _____ Phone _____

Various Monthly Expenses:

Rent/mortgage \$ _____

Utilities (electricity, water, gas) \$ _____

Telephone \$ _____

Cell phone \$ _____

Cable \$ _____

Internet \$ _____

Food and Sundries \$ _____

Clothing \$ _____

Medical, Dental and Drug Expenses \$ _____

Insurance (auto, life, medical, homeowners/rental) \$ _____

Alimony or Child Support Payments \$ _____

Taxes not included in Mortgage \$ _____

School Books and Expenses \$ _____

Other Expenses: _____ \$ _____

TOTAL EXPENSES \$ _____

List of all Personal Property Owned by You or Spouse and Value

Cash on Hand \$ _____

Household Furniture and Furnishings: \$ _____

Household Goods and Supplies: \$ _____

Jewelry: \$ _____

Sports Equipment and Musical Instruments: Televisions,
VCRs, DVDs, Stereo, Camera Equipment: \$ _____

Household Appliances: \$ _____

Trailers, Boats, Motorcycles, ATVs, etc. and Accessories: \$ _____

Machinery, Tools, Lawn and Garden Equipment \$ _____

Computers, Printers, Office Equipment, Supplies, Furniture, Inventory, etc. \$ _____

Farm Equipment, Supplies, Livestock, and Other Animals: \$ _____

Any Other Property Not Listed Above: \$ _____

TOTAL PROPERTY AMOUNT \$ _____

I understand that failure to provide all of the information requested is considered an incomplete application and will not be reviewed.

I promise that until my fines have been paid in full, I will notify this court in person or by first-class mail of any changes of my address or telephone number at the following address, 500 West 8th Street, Vancouver, Washington 98660 within five (5) days of the change.

I understand that I have a continuing obligation until my fines are paid in full to notify the court of any changes in my financial status that may hinder my ability to satisfy the judgment or help me satisfy the judgment.

I authorize the Clark County Superior Court Clerk's Office, employees or agents, to conduct a complete and thorough investigation of any of the above statements. I understand this investigation could include direct verifications of all information given and the obtaining of reports from credit reporting agencies.

I swear or affirm that all the information in this application is true, correct, and complete to the best of my knowledge and belief and I have given a complete and accurate disclosure of my income and financial status.

My signature on this document indicates that I have read the document, understand it, and agree to all statements included.

Date _____

Defendant's signature _____