

**CHELAN COUNTY DISTRICT COURT
CHELAN COUNTY, STATE OF WASHINGTON**

STATE OF WASHINGTON)	
CITY OF WENATCHEE)	
)	Plaintiff,
Vs.)	CASE NO. _____
)	
)	ACKNOWLEDGMENT OF NOTICE OF
)	POTENTIAL LIABILITY FOR ATTORNEY FEES
_____)	
)	Defendant.

The undersigned defendant, having requested the appointment of an attorney due to indigency, hereby acknowledges that in connection with such request he/she has been advised that the court may impose the obligation of repaying the fees and costs of the attorney appointed on the following conditions:

1. That the imposition of the obligation to repay such costs and attorney fees would be based upon a foreseeable ability of the undersigned to pay.
2. That the undersigned would be entitled to the same exemption as civil judgment debtors at execution.
3. The order imposing the obligation to pay would not be enforceable by contempt or by revocation of suspended sentence unless non-payment is intentional or in bad faith.

Fully understanding the above advice, the undersigned hereby requests that an attorney be appointed to represent him/her in the above matters.

DATED this _____ day of _____, 20_____.

Defendant

Address

City, State, Zip