



CHELAN COUNTY DISTRICT COURT  
350 ORONDO AVE 4<sup>TH</sup> FLOOR  
PO BOX 2686  
WENATCHEE WA 98807-2686  
509-667-6600

**REQUEST FOR DECISION ON WRITTEN STATEMENT**  
**\*\*TO BE COMPLETED AND RETURNED TO THE COURT IF WISHING**  
**TO HAVE A HEARING BY MAIL RATHER THAN PERSONAL APPEARANCE\*\***

\*\*\*PLEASE NOTE THAT AFTER REVIEW OF YOUR STATEMENT, THE JUDGE MAY REQUIRE AN IN COURT HEARING BE SET\*\*\*

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Citation Number (see upper right corner of citation and/or hearing notice: \_\_\_\_\_

I wish to mitigate the infraction(s) and seek a fine reduction

I wish to contest the infraction(s)

Statement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(If you need more space, please attach additional sheets of paper, along with any other evidence/ documentation you want the court to consider.

I declare under penalty of perjury of the laws of the State of Washington that the above information and the information contained in the attachments hereto, is true and correct. I understand that there can be no appeal from a decision on a written statement pursuant to IRLJ 3.5(e).

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_  
(City / State)

\_\_\_\_\_  
Defendant Signature