**IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON**

**FOR** **COUNTY**

|  |  |
| --- | --- |
| STATE OF WASHINGTON |  |
|  |  |
| Respondent | No. Cause Number |
|  |  |
|  | DESIGNATION OF CLERK’S |
| v | PAPERS |
|  |  |
|  | **CLERK’S ACTION REQUIRED** |
| Click or tap here to enter text. | **Note to Clerk: Please provide a copy of the indexed clerk’s papers** |
| Appellant | **and exhibits to appellate counsel.** |
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TO THE CLERK OF THE COURT

Please prepare and transmit to the Court of Appeals, Division I/II/III, the following clerk’s papers.

|  |  |
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| Sub # | Document |
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A copy of this document is being filed with the Court of Appeals.

DATED this \_\_th day of [Month], 20XX.

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

Attorney name, WSBA #

### DECLARATION OF SERVICE

### The undersigned certifies under penalty of perjury under the laws of the State of Washington that on the below date, the original document to which this declaration is attached, was filed in the Superior Court and the Court of Appeals and served electronically upon the following:

[ ]  Respondent, Click or tap here to enter text. County Prosecuting Attorney

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click or tap to enter a date.