E-FILED
THURSTON COUNTY, WA
SUPERIOR COURT
12/29/2021 - 8:00AM
Linda Myhre Enlow
Thurston County Clerk

[ ] EXPEDITE (If filed within 5 court days of hearing)
[X] Hearing is set: To accompany motion on same day & time
Date: 12-29-21 ***reconsider***
Time: 4:00pm Zoom #:242-974-5214 Rrn:4
Judge/Calendar: Commissioner/Reconsdr **Ex Parte** Mot Wav Fees

Superior Court of Washington **For** Thurston County Family Court	**No**. 21-4-00452-34
In Re: Emergency Guardianship of Raven & Onawa Smith-Wells Respondent/Defendant.	**Reconsider Ex Parte Motion & Declaration For Waiver of Civil/Appellate Fees & Surcharges (MTWVF)** **RCW 11.130.170(3),** Abeda JAFAR, Petitioner, v. William Douglass WEBB, Respondent, **No. 87009−8** **Decided: May 23, 2013**

I. Motion

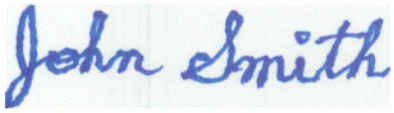
1.1 I am the [ ] petitioner/plaintiff [ ] respondent/defendant in this action. [X} **Grandfather**

1.2 I am asking for a waiver of fees and surcharges under GR 34 & RCW11.130.170(3).

II. Basis for Motion

2.1 GR 34, RCW 11.130.170(3), and Abeda JAFAR, Petitioner v. William Douglass WEBB, Respondent, No. 87009-8 allows the court to waive "fees or surcharges the payment of which is a condition precedent to a litigant's ability to secure access to judicial relief" for a person who is indigent. As outlined below, I am indigent/unable to pay appellate fees.

Dated: 12-28-21



Signature of Requesting Party

John Smith, grandfather (Appellant)
Print or Type Name (Ph. 360-427-3599)

III. Declaration

I declare that,

3.1 I cannot afford to meet my necessary household living expenses and pay the fees and surcharges imposed by the court. Please see the attached Financial Statement, which I incorporate as part of this declaration.

3.2 In addition to the information in the financial statement, I would like the court to consider the following:
I am currently recovering from surgery and disabled as a result. I am housebound while waiting for my foot to heal which I nearly lost. I am looking at a lot of medical expenses after spending from Nov. 23, 2021 to Dec. 3, 2021 in Olympia's St, Peters Hospital because of a severe infection in my foot and leg. I am diabetic. I have a very limited fixed income and am 75 years old. My income after Part 'B' Medicare premiums are deducted is about $500/month. I am trying to intervene to prevent a miscarriage of justice affecting myself, my 3 grandchildren, and their mother. I have been unlawfully thwarted from joining under CR 1 9 & 24 to date—unjustly so. RCW 11.130.270 appears to intend close relatives involved in a guardianship for minors litigation are excused from paying fees which I could not pay in any event.

_____.

[ ] (Check if applies.) I filed this motion by mail. I enclosed a self-addressed stamped envelope with the motion so that I can receive a copy of the order once it is signed.

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at (county) _**MASON**_, (state) __**WA**__ on (date) _**12-28-21**_.

_____ John Smith
Signature Print or Type Name