

COURT: ☐ Superior ☐ District ☐ Municipal	CITY OF: _____ COUNTY OF: _____ STATE OF WASHINGTON
_____, vs. _____ Plaintiff Defendant	

☐ No.: _____
☐ Administrative Filing
☐ Case file No.: _____
Quarter: 1 2 3 4 **Year:** _____

**CERTIFICATION OF
 APPOINTED COUNSEL
 OF COMPLIANCE WITH
 STANDARDS REQUIRED BY
 CrR 3.1 / CrRLJ 3.1 / JuCR 9.2**

The undersigned attorney hereby certifies:

1. I _____ am familiar with the Standards for Indigent Defense adopted by the Supreme Court which apply to attorneys appointed to represent indigent clients.:
2. I file certification forms in each court and in each case in which I am appointed to provide indigent defense representation.
3. Approximately ____% of my total practice time is devoted to indigent defense cases.
 Approximately ____% of my total practice time is devoted to indigent defense cases in this court.
4. I am appointed in other courts to provide indigent defense representation. My practice time in each of those courts is approximately as follows:
 ☐ Not Applicable
 _____ Court of _____. Total practice: ____%
 _____ Court of _____. Total practice: ____%
 _____ Court of _____. Total practice: ____%
 _____ Court of _____. Total practice: ____%
 _____ Court of _____. Total practice: ____%
5. **Caseload:** I limit the number of cases and mix of case types to the caseload limits required by Standards 3.2, 3.3 and 3.4, provided that the graduated implementation of these standards as authorized in Standard 3.4 is compliant with the standards adopted. My caseload is prorated to the percentage of my practice devoted to indigent defense.
6. **Qualifications:** I meet the minimum basic professional qualifications in the current WSBA Standards for Indigent Defense Services. I am familiar with the specific case qualifications in the WSBA Standards for Indigent Defense Services and accept appointment as lead counsel only when I meet the qualifications for that case.
7. **Office:** I have access to an office that accommodates confidential meetings, receipt of mail, and adequate telephone and communication services as required by Standard 5.2.
8. **Investigators:** I have investigators available to me and use investigative services as appropriate, as required by Standard 6.1.

Attorney Signature

WSBA#

Date