

☐ (Party in prison) Declaration:

I, \_\_\_\_\_, know I had the right to get an attorney to represent me. I also know that the attorney for the state does not represent me. I agree to this attached order.

\_\_\_\_\_  
Party Name

\_\_\_\_\_  
Date signed

☐

\_\_\_\_\_  
Attorney for Party Name

\_\_\_\_\_  
Date signed

☐ (Party is a service member) Declaration:

I, \_\_\_\_\_, know I had the right to get an attorney to represent me. I also know that the attorney for the state does not represent me. I agree to this attached order. I give up any rights given me by the Service Members Civil Relief Act (50 U.S.C. App. 501 et seq.).

\_\_\_\_\_  
Party Name

\_\_\_\_\_  
Date signed

☐

\_\_\_\_\_  
Attorney for Party Name

\_\_\_\_\_  
Date signed

☐ (Party not in prison nor a service member) Declaration:

I, \_\_\_\_\_, know I had the right to get an attorney to represent me. I also know that the attorney for the state does not represent me. I agree to this attached order.

\_\_\_\_\_  
Party Name

\_\_\_\_\_  
Date signed

☐

\_\_\_\_\_  
Attorney for Party Name

\_\_\_\_\_  
Date signed

CSC # \_\_\_\_\_

