

Instructions: You must fill out this form completely, legibly, and accurately. Failure to fill in your name, accurate case numbers, birthdate, contact information, complete the Declaration section, and/or properly sign the document in the multiple areas required may cause this document to be rejected for filing with the Court and to be returned to you. **Please Note:** The terms "case number", "cause number", "notice number", "ticket number", and "citation number" may be used interchangeably to refer to the court number assigned to your case.

Spokane Municipal Court County of Spokane, State of Washington	
CITY OF SPOKANE, Plaintiff, vs Defendant, DOB	Case No. MOTION TO RELEASE WEAPONS

MOTION

COMES NOW the Defendant and moves the Court for an order releasing a weapon that was either confiscated by law enforcement, or that was surrendered by the Defendant, in connection with the above-captioned matter and directing the Spokane Police Department to release the weapon or weapons identified in the following declaration. This motion is based upon the pleading and papers on file herein and upon the following declaration.

➤ _____
Signature of Moving Party/Defendant (your typed name represents your signature) Date

DECLARATION

COMES NOW the declarant, who is also the Defendant in the above-captioned matter, and makes the following declaration in support of the declarant's Motion to Release Weapons:

I was the lawful owner of the following described weapon(s) at the time it was seized by law enforcement or surrendered by me:

Weapon Description	Serial No. / Identifying Mark

I am NOT prohibited from possessing firearms and/or weapons based upon a felony conviction, domestic violence conviction, other court order, or any other reason.

I have received notice from law enforcement that a firearm or other weapon held by law enforcement will be disposed of if not claimed by:

A copy of the notice is attached to this pleading. (Notice required to be attached)

I am requesting a firearm be released to myself, using the following information:

Last Name

First Name

MI

Street Address

City

State

Zip

Washington Driver's License No.

Date of Birth

Other information supporting motion:

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

Signed at

City

State

on

Date



Signature of Declarant/Defendant (your typed name represents your signature)

MOTION TO RELEASE WEAPONS

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