

# 2012 WACO LEGISLATIVE RECOMMENDATION FORM



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**WACO Affiliate Submitting Proposal: Washington State Sheriffs**

**Brief Description of Issue: Removal of Fee for application of Vulnerable Adult Protection orders**

Please describe, in as much detail as necessary, the problem that has been identified, the suggested solution, and the expected outcome should the issue be taken up. Please also include legislative drafting language. Please include relevant facts, figures and statistics as appropriate.

When requested to serve an order from the court Sheriffs are, by law, required to charge a fee for service. With regards to vulnerable adult protection orders, in some cases where a person on fixed income is seeking service of the order, the service fee can be a factor in the decision to carry out the application and service process. The Sheriffs feel it would be helpful to this segment of our population if the fee for this type of service was waived. The potential outcome may be less reluctance to pursue this type of order if our senior citizens were not required to put forth funds they don't have.

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**Impact on WACO Affiliates:**

Assessor: None.

Auditor: None

Clerk: None

Coroner: None

Prosecutor: None.

Sheriff: Loss of minimal revenues to general fund.

Treasurer: None

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**Impact on the public: May eliminate reluctance to pursue protection orders for vulnerable adults when the monetary impact is eliminated.**

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**Does this issue have a fiscal impact on counties? (Check all that apply)**

- Increased revenue to counties      X Decreased revenue to counties-**Minimal**
- Increased costs to counties       Decreased costs to counties
- No county fiscal impact

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**Does this issue require state expenditure of funds?**      NO

If Yes, approximately how much, and provide from what source: [Click here to enter text.](#)

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**Does this issue require a change to the RCW?**      YES

If Yes, please provide the appropriate RCW Title, Chapter and Section to be created, amended or deleted: To be provided

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**Has this issue been presented to the Legislature before?**      No

If Yes, please provide as much detail as is available, including year, bill number, result, etc.:  
[Click here to enter text.](#)

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**If this issue is taken up by WACO, are there specific legislators that WACO should contact regarding the issue?**      **Most likely**

If Yes, please list which legislators and their position on the issue: **To be determined with assistance from WACO**

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**Has this issue been presented to other WACO Members?**      NO

If Yes, please list which WACO members and their position on the issue:  
[Click here to enter text.](#)

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**Is your affiliate willing and able to spend time in Olympia during the session to meet with legislators, and testify to this issue in Legislative committee hearings?**      Yes

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**If WACO acts on the request, what individuals/entities are likely to agree with WACO's position on the issue:** Department of Social and Health Services- Adult Protective Services.

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If WACO acts on the request, what individuals/entities are likely to disagree with WACO's position on the issue, and why?                      None known

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Submitted by,

NAME:            Dave Brown

AFFILIATE TITLE:      President, Washington State Sheriffs Association

DATE SUBMITTED:    09/02/11

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