WSBA License Fee Payment Plan Request Form

Name: _____ WSBA #: _____

Address: _____

Email: _____ Phone: _____

3-Month License Fee Payment Plan **DEADLINE FOR RECEIPT OF FORM: DECEMBER 1, 2014**

- On February 2 any balance that remains will be charged to the credit card.
- A $3 service fee will be added to each payment.
- You must complete the other parts of your license renewal on mywsba.org or by filing the paper form(s).

Membership	2015 License Fee + Mandatory LFCP + Service Fee	Total	**December 1 payment**	January 1 payment	February 2 payment
Active – Admitted to ANY bar prior to 2013	$325 + $30 + $9	$364	**$141.33**	$111.34	$111.33
Active – Admitted to ANY bar in 2013 or 2014	$162.50 + $30 + $9	$201.50	**$87.17**	$57.17	$57.16
Inactive/Emeritus	$200 + $9	$209	**$69.67**	$69.67	$69.66

OPTIONAL DEDUCTIONS AND DONATIONS

Optional Keller Deduction: Members may elect to reduce their license fee payment by the pro rata amount used for political activities not related to regulating the practice of law or improving the quality of legal services. Members wanting to take this deduction may deduct up to $4.40 on a $325 fee; $2.20 on a $162.50 fee; or $2.71 on a $200 fee. *To take this deduction, write in the deduction amount.*	(_____).
OPTIONAL charitable donation to the Washington State Bar Foundation to help advance justice through support of WSBA's public service and diversity programs. Learn more at wsba.org/foundation. *To opt-out or donate a different amount to the Bar Foundation, strike the $50 and enter a different amount.*	$ 50.00 _____
OPTIONAL charitable donation to LAW Fund's Campaign for Equal Justice to support 20 civil legal aid programs that serve our state's poorest families and individuals. Learn more at www.c4ej.org. *To opt-out or donate a different amount to LAW Fund, strike the $50 and enter a different amount.*	$ 50.00 _____
TOTAL DEDUCTIONS AND DONATIONS - Applied to December 1 payment	$

Combine Total Deductions and Donations with your payment amount: **$_____** (December 1) **$_____** (January 1) **$_____** (February 2)

I hereby authorize the WSBA to charge the following credit card according to the payment schedule. Any optional deduction or donation written in above will be recognized in the first payment.

☐ Visa ☐ MC ☐ AMEX _____ - _____ - _____ - _____ Exp. Date _____ - _____

Name on Card: _____Signature: _____

Please return this form by the deadline noted above to the Washington State Bar Association, Attn: Accounting Division. To learn more, contact the WSBA Service Center or visit wsba.org/licensing.

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