## Declaration of Agreement

I/and my family members <sup>1</sup> hereby declare to allow the Legal Aid Commission to investigate my / my family members' and my <sup>2</sup> bank account(s) as well as other data that help to verify the available assets in accordance with Article 17, Paragraph 3 of the Law 13/2012 "Legal Aid System" <sup>3</sup> .			
	Family Members		
	Name		Signature
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

1. Cross out where inappropriate.

Applicant (Signature):

- 2. Cross out where inappropriate.
- 3. Application will be rejected if the applicant refuses to or fails to provide the documents, information and permission stated by Article 17 Paragraph 3 of the Law 13/2012 "Legal Aid System" within the specified period.

Date: