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AUG 23 2024

TIMOTHY W. FITZGERALD
SPOKANE COUNTY CLERK

Court of Washington		No. 17-3-01817-0
For		
<u>SIRINYA SURINA</u> Petitioner	DOB _____	Declaration of <u>Aaron Surina</u> (Name) (DCLR) (Optional Use) (Clerk's Action Required)
vs. <u>Aaron Surina</u> Respondent	DOB _____	

This declaration is made by:

Name: Aaron Surina

Age: 47

Relationship to the parties in this action: _____

I declare,

that on or about 8/21/24, I received
video that corroborated reports from
my son about being abused and violently
beaten by mom & step dad.
Video shows both of the adults
BRUTALLY BEATING Andrew
unconscious - he goes totally limp
and unresponsive.

He has been collapsing w/o cause
randomly since.
He has been Derm hurt

Lined area for text entry.

(Attach additional single-sided pages if necessary and number them. Use form DVSTMT, Statement.)

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signed at Spokane (city) WA (state) on 8/23/24 (date).

[Handwritten Signature]
Signature of Declarant

Acron Surwa
Print or Type Name