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SPOKANE COUNTY CLERK

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SPOKANE COUNTY CLERK

SUPERIOR COURT OF WASHINGTON

SPOKANE COUNTY

SIRINYA SURINA, Plaintiff, vs. AARON SURINA, Defendant	Case No.: 17-3-01817-0 COVER SHEET & AFFIDAVIT OF RESPONDENT RE: CONTEMPT ON PETITIONER REFUSAL TO HEALTHCARE COSTS

I, Aaron Surina, the respondent in the aforementioned case, hereby submit this cover sheet to accompany the expenses incurred and documented on the Our Family Wizard (OFW) platform. These expenses represent a clear pattern of refusal by the petitioner, Sirinya Polarj, to meet her court-ordered obligations when they involve providing financial support for our children.

Attachment: Refused Expenses on Our Family Wizard

The attached documentation reveals that the petitioner has consistently chosen to decline her responsibility to support our children, even when the expenses are reasonable and directly related to their well-being. It is crucial to note that these refusals are not about budget constraints or financial limitations, as the petitioner's responses are based on the presumption that someone else will bear the financial burden for our

Pg 1 of 6

children. This behavior is not only unjust but also detrimental to the best interests of our children.

The petitioner's unwavering refusal to contribute even one dollar toward these expenses underscores her disregard for her court-ordered obligations and her sole focus on financial gain, rather than the well-being of our children. Her actions paint a distressing picture of her unwillingness to participate in the financial support and upbringing of our children while keeping them in an isolated manner with limited contact.

I respectfully request that this court takes into consideration the attached documentation as evidence of the petitioner's consistent pattern of refusal to support our children's needs and expenses, as well as her lack of cooperation in fulfilling her court-mandated responsibilities.

It is my hope that this evidence will help shed light on the petitioner's behavior and contribute to the court's decision in the best interests of our children.

I declare under penalty of perjury under the laws of the state of Washington that the facts I have provided on this form are true.

I affirm the accuracy and authenticity of the attached expenses documentation and this cover sheet.

Sincerely,

Aaron Surina

Signed in Spokane, WA Date: 9/22/23

enclosed:

EXHIBIT: A

— 4 pages of refusals to financially provide & support the healthcare of our children

EXHIBIT B: OUR FAMILY WIZARD Reimbursement Refusals

EXHIBIT A

OurFamilyWizard, LLC
701 N Washing Ave Suite 700
Minneapolis, MN 55401
https://www.OurFamilyWizard.com
Info@OurFamilyWizard.com

Print Selected Expenses

Aaron Surina generated this report on 09/22/23 at 01:55 AM and contains 6 expenses with the following filters applied:

Date: -

Creator:

Expense Categories:

Status:

Expense for:

All times are listed in America/Los_Angeles timezone.

[redacted]

David Medical bill from July 2021

Purchase Date: 07/07/2021

Category: Medical / Dental

Amount: $456.58

To Be Paid: $228.29

Children: David Surina

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Aaron Surina 07/07/2021 10:20:59 AM
Updated by Aaron Surina 09/11/2023 2:41:11 PM

[redacted]

karate class

Purchase Date: 03/04/2020

Category: Other

Amount: $105.00

To Be Paid: $0.00

Children: David Surina

Receipt File: None

Private Entry: No

Recurring: No

Expense History:

Created by Aaron Surina 04/03/2020 5:24:39 PM
Refused by Sirinya Surina 06/09/2020 7:02:46 PM

[redacted]

Andrew's ER Visit from the doctor office head injury incident

Purchase Date: 10/16/2019

Category: General

Amount: $480.00

To Be Paid: $0.00

Children: Andrew Surina

Receipt File: img_6986.jpg

Private Entry: No

Recurring: No

Expense History:

Created by Aaron Surina 03/25/2020 7:21:34 PM
Refused by Sirinya Surina 06/09/2020 7:02:23 PM

[redacted]

Sirinya Medical bill

Purchase Date: 12/11/2019

Category: Personal

Amount: $266.00

To Be Paid: $0.00

Children: David Surina, Andrew Surina

Receipt File: img_5753.heic

Private Entry: No

Recurring: No

Expense History:

Created by Aaron Surina 02/11/2020 7:31:03 PM
Updated by Aaron Surina 04/01/2020 7:40:36 PM
Updated by Aaron Surina 02/04/2021 2:23:16 PM
Refused by Sirinya Surina 02/25/2021 10:04:22 AM

[redacted]

David Medical

Purchase Date: 12/18/2019

Category: General

Amount: $309.00

To Be Paid: $0.00

Children: David Surina

Receipt File: img_5755.heic

Private Entry: No

Recurring: No

Expense History:

Created by Aaron Surina 02/10/2020 8:22:19 AM
Updated by Aaron Surina 02/11/2020 7:34:02 PM
Updated by Aaron Surina 02/11/2020 7:34:02 PM
Refused by Sirinya Surina 06/09/2020 7:02:29 PM

[redacted]

Emergency room from Andrew's head injury

Purchase Date: 10/15/2019

Category: General

Amount: $503.00

To Be Paid: $0.00

Children: Andrew Surina

Receipt File: img_5750.heic

Private Entry: No

Recurring: No

Expense History:

Created by Aaron Surina 02/10/2020 8:21:10 AM
Updated by Aaron Surina 02/11/2020 6:17:02 PM
Updated by Aaron Surina 02/11/2020 7:31:31 PM
Updated by Aaron Surina 02/11/2020 7:32:35 PM
Updated by Aaron Surina 02/11/2020 7:32:35 PM
Refused by Sirinya Surina 06/09/2020 7:02:17 PM

Expense Log

Search expense log...

	Select all	
	Jul 07, 2021	
	David Medical bill f... **DS** Purchased: 07/07/2021	**Sirinya owes** **$228.29**
	Medical / Dental (50/50) Total: $456.58	Open
	Apr 03, 2020	
	karate class **DS** Purchased: 03/04/2020	**Sirinya refused** **$52.50**
	Other (50/50) Total: $105.00	Refused
	Mar 25, 2020	
	Andrew's ER Visit fr... **AS** Purchased: 10/16/2019	**Sirinya refused** **$240.00**
	General (50/50) Total: $480.00	Refused
	Feb 11, 2020	
	Sirinya Medical bill **DS AS** Purchased: 12/11/2019	**Sirinya refused** **$0.00**
	Personal (100/0) Total: $266.00	Refused

EXHIBIT B page 1 of 3

Select all

Feb 10, 2020

David Medical

DS

Purchased: 12/18/2019

Sirinya refused
$154.50

EXHIBIT (B) pg 2 of 3

Select all

Feb 10, 2020

Emergency room from ... **Sirinya refused**

AS **$251.50**

Purchased: 10/15/2019

General (50/50) Refused

EXHIBIT B pg 3 of 3

State of Washington, County of Spokane

In re: surina pet to mod PP
Sirinya Surina
Petitioner
&
Aaron Surina
Respondent

Case No. 17-3-01817-0

AFFIDAVIT OF FACTS BY RESPONDENT

(NOTARIZED SWORN, SIGNED AND SUBSCRIBED)

SWORN STATEMENT

I, Aaron Surina, residing at 3318 S. Bernard St, Spokane, WA 99203, being duly sworn, depose and state as follows:

I am the affiant in this matter and have personal knowledge of the facts stated herein.

I understand that I am making this statement under oath and subject to the penalties of perjury.

I certify that the information contained in this affidavit is true and correct to the best of my knowledge, information, and belief.

I understand that providing false information in this affidavit may result in legal consequences, including but not limited to perjury charges.

I have executed this affidavit voluntarily and without any form of coercion or duress.

Signature: _____ 10/12/23

Aaron Surina **Date:**

NOTARY BLOCK:

Subscribed and sworn to before me on this 12th **day of** October, **2023 at Spokane, Spokane County, Washington.**

Notary Public: _____

[Notary Public's Name]

My Commission Expires:

January 09, 2027

[Notary Public's Commission Expiration Date]

Dated this 12th of October, 2023
Attached: affidavit in support of mod of parenting plan * COVER SHEET & In Support of Contempt Healthcare reimbursement

Notary Public
State of Washington
JORDAN WELTER
COMMISSION# 23000736
MY COMMISSION EXPIRES
January 09, 2027