

PO. Box 28415 Seattle, WA 98118 Fax or Phone: 206-725-6617

## Stipulation for Counseling

THIS STIPULATION is entered into between the respondents,	and
and they declare and agree	ee to the following:
All communications among the parties and the counselor will be a Both parties stipulate that Robley K. Yee, Ph.D. LICSW, will not any proceeding or in any court, opinions, records, documents, or psychotherapy process. It is in the best interests of the parties that legal action when involved in psychotherapy. Without both partiquite likely that the therapeutic alliance would be affected detrimed obeying the statutory requirements to report information about: one glect or exploitation; an actual threat of violence against a reason illness that requires involuntary commitment because of danger to	be required to testify at or to produce for recordings formed or created as part of the at no one feels influenced by any impending es entering into this type of stipulation, it is entally. This stipulation does not preclude shild, adult dependent person or elder abuse, conably identifiable victim(s); or mental
These stipulations have been explained to us and we agree to abic opportunity into inquire into the experience and credentials of the	•
We certify under penalty of perjury under the laws of Washington mutually agreed upon.	n that the foregoing is true and correct and
Signature	Date
Signature	