

**Superior Court of Washington
County of**

In the Guardianship of:

_____,
Incapacitated Person

No.

**Notice of Hearing and
Declaration of Mailing
(NTMTDK)**

To the Clerk of the Court and to all other parties and persons entitled to notice and as listed on Page 2.

Please Take Notice that this case will be heard at the date and time stated below:

Date: _____ Time: _____

Nature Of Relief Requested:

- Review and Approval of Guardian's Report and Accounting.
 Other Requests (Specify): _____

Hearing Location:

Court Room No.: _____

Court: _____

Address: _____

1. The originals of this Notice, the Report and Accounting, and Petition **must be filed** with the Clerk's Office. **Review your court's local rules and procedures to determine the deadline for filing and serving court documents; some courts require 14 days' notice and that a copy of all documents be delivered to the courtroom in advance of the hearing.**
2. List the names, addresses and telephone numbers of all parties and persons entitled to notice below.
3. When you file your original forms, mail a copy of this notice of hearing and all other documents to the persons listed below.

Declaration of Mailing

I certify (or declare) under penalty of perjury under the laws of the state of Washington, that on the date written below, I mailed a true and correct copy of:

- This Notice of Hearing and Declaration of Mailing
- The Petition for Approval of Budget, Disbursements and Initial Personal Care Plan
- The Guardian's Report, Accounting, Proposed Budget

with first class postage prepaid to the persons and addresses listed below:

All Persons and Agencies Requiring Notice

Name:	Name:
Address:	Address:
City, State, Zip:	City, State, Zip:
*Telephone	*Telephone
Name:	Name:
Address:	Address:
City, State, Zip:	City, State, Zip:
*Telephone	*Telephone

Signed at (city) _____, (state) _____ on (date) _____.

Signature

Print Name

Address

City, State, Zip

*Telephone/Fax Number

Email Address

***If you do not want your personal phone number on this public form, you may list your telephone number on a separate form which may be available to parties and the court, as well as its staff and volunteers, but will not be made available to the public. Use Form WPF GDN 03.0100, Guardianship Confidential Information form (Telephone Numbers), for this purpose.**