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8	IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON
9	IN AND FOR THE COUNTY OF KING
10	In the Guardianship of:) Case No.:
11	, CREDITOR'S RECEIPT
12	An Incapacitated Person. (RCP)
13	I acknowledge receipt in the amount of \$ from the Guardianship
14	Estate. This amount is accepted in full payment and satisfaction of a claim that the Guardian
15	or Court has previously approved, and which was submitted on behalf of
16	·
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18	I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT.
19	Signed at, Washington,,,200
20	
21	Signature Printed Name
22	
23	Address Telephone/Fax Number
24	City, State, Zip Code Email Address
25	
26	
	RECEIPT OF CREDITOR- 1

12/2005 GUARDIANSHIP FORMS