

Superior Court of Washington, County of _____

In the Guardianship/Conservatorship of:

No. _____

_____,
Respondent/Minor/s

**Proof of Mailing, Hand Delivery,
or E-mail
(AFSR)**

Proof of Mailing, Hand Delivery, or E-Mail

*To be used when personal service is **not** required.*

I declare:

1. Who is Giving Notice

I am (*check one*): the Petitioner the Guardian/Conservator

(*name*): _____ and I am competent to be a witness in this case.

2. Documents Delivered

a. For Use in a Minor Guardianship:

<input type="checkbox"/> Minor Guardianship Petition	<input type="checkbox"/> Declaration Explaining the Reasons for Minor Guardianship
<input type="checkbox"/> Notice of Hearing: _____	<input type="checkbox"/> Order: _____
<input type="checkbox"/> Declaration of: _____	<input type="checkbox"/> Declaration of: _____
<input type="checkbox"/> Declaration of: _____	<input type="checkbox"/> Motion for: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

b. For Use in an Adult Guardianship or Conservatorship *After* Appointment:

<input type="checkbox"/> Guardian/Conservator's Plan	<input type="checkbox"/> Inventory
<input type="checkbox"/> Notice of Right to Object to Plan	<input type="checkbox"/> Guardian/Conservator's Report

<input type="checkbox"/> Notice of Substantial Change in Circumstances	<input type="checkbox"/> Notice of Rights
<input type="checkbox"/> Order: _____	<input type="checkbox"/> Notice of Hearing: _____
<input type="checkbox"/> Declaration of: _____	<input type="checkbox"/> Motion for: _____
<input type="checkbox"/> Sealed Records: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

3. Proof of Mailing, Hand Delivery, or E-mail

On (date) _____ at (time) _____ a.m. p.m., I delivered true and correct copies of the documents listed in paragraph 2 above to the following individuals at the following addresses by the method indicated: *(If additional space is needed, attach a separate sheet of paper.)*

Name/s: _____	<input type="checkbox"/> Hand Delivered
_____	<input type="checkbox"/> Regular 1 st Class US Mail
Address: _____	<input type="checkbox"/> Certified Mail, Return Receipt Requested
_____	<input type="checkbox"/> E-mail
	<input type="checkbox"/> Other: _____

Name/s: _____	<input type="checkbox"/> Hand Delivered
_____	<input type="checkbox"/> Regular 1 st Class US Mail
Address: _____	<input type="checkbox"/> Certified Mail, Return Receipt Requested
_____	<input type="checkbox"/> E-mail
	<input type="checkbox"/> Other: _____

Name/s: _____	<input type="checkbox"/> Hand Delivered
_____	<input type="checkbox"/> Regular 1 st Class US Mail
Address: _____	<input type="checkbox"/> Certified Mail, Return Receipt Requested
_____	<input type="checkbox"/> E-mail
	<input type="checkbox"/> Other: _____

Name/s: _____	<input type="checkbox"/> Hand Delivered
_____	<input type="checkbox"/> Regular 1 st Class US Mail
Address: _____	<input type="checkbox"/> Certified Mail, Return Receipt Requested
_____	<input type="checkbox"/> E-mail
	<input type="checkbox"/> Other: _____

I declare under penalty of perjury under the laws of the State of Washington that the statements above are true and correct.

Signed at (city and state) _____ on (date) _____

Signature

Printed Name