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**IN THE SUPERIOR COURT OF THE STATE OF WASHINGTON  
IN AND FOR THE COUNTY OF PIERCE**

**In the Guardianship of:** \_\_\_\_\_ ) **Case No.:** \_\_\_\_\_  
 )  
 ) **OATH OF GUARDIAN**  
 ) **RCW 11.88.100**  
 )  
 ) Clerk's code: **(OA)**  
 )  
 **An Incapacitated Person.** \_\_\_\_\_ )

Being first duty sworn upon oath, I \_\_\_\_\_ solemnly swear that:

I have been appointed:  Full  Limited Guardian of the Person and  
 Full  Limited Guardian of the Estate

of \_\_\_\_\_ (*the Incapacitated Person*).

I shall faithfully perform all the duties of my trust as Guardian according to law. I understand that the basic duties of a Guardian are described in Chapters 11.88 and 11.92 of the Revised Code of Washington.

**I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT.**

Signed at \_\_\_\_\_, Washington this \_\_\_\_ day of \_\_\_\_\_ 200\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone/Fax Number

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Email Address