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

In the Guardianship of: _____) **Case No.:**
)
) **ORDER APPROVING BUDGET,**
) **DISBURSEMENTS AND INITIAL CARE**
) **PLAN (90 DAY)**
)
) Clerk's Code: **(ORAPBCP)**
An Incapacitated Person. _____) **CLERK'S ACTION REQUIRED**
)

BOND SUMMARY

**NOTICE: NO LETTERS OF ADMINISTRATION OR LETTERS OF GUARDIANSHIP SHALL
ISSUE BY THE CLERK'S OFFICE UNTIL THE COURT ORDERED BOND HAS BEEN POSTED.**

BOND SUMMARY is set forth below:

Date Bond Ordered: _____

Amount of Court Ordered Bond: \$ _____

FINDINGS OF FACT

- 1. Acts of Guardian.** All acts required of the Guardian to date have been performed.
- 2. Notice.** Notice has been properly provided to persons entitled to notice of this presentation.
- 3. Budget and Care Plan.** The proposed Budget and Care Plan of the Guardian are reasonable and appropriate to the needs of the Incapacitated Person and should be approved.

ORDER

1
2 **1. Approval of Initial Personal Care Plan.** The Initial Personal Care Plan is hereby approved.

3 **2. Budget and Disbursements.** The Guardian is authorized to continue to receive the Incapacitated
4 Person's income and to apply the income and other resources toward the Incapacitated Person's
5 expenses:

6 Room and Board	\$
7 Medical	\$
8 Rent/Mortgage	\$
9 Personal and Incidental Expenses	\$
10 Food and Household Expenses	\$
11 Utilities	\$
12 Guardian Fees	\$
13 Other	\$
14 Total Proposed Monthly Expenditures	\$

15 **3. Outstanding Obligations of the Estate.** The Guardian shall be authorized to arrange payment
16 schedules with the creditors of the guardianship estate for delinquent and past due payments.

17 **4. Medical and Dental Expenses.** The Guardian is authorized to incur and pay reasonable and
18 necessary medical and dental expenses that the Guardian determines to be in the best interest of the
19 Incapacitated Person.

20 **5. Income Tax Payments; Accounting Fees.** The Guardian is authorized to make payments for
21 income tax due as required, and to pay fees for accounting services required in connection with the
22 preparation of income tax returns.

23 **6. Miscellaneous Expenses.** The Guardian is authorized to pay all expenses incurred by way of fees
24 of the Clerk of the Court, and \$_____ per month in connection with this guardianship for the
25 following expenses: _____

7. Accounting Due Date. The Report and Accounting of the Guardian shall be filed and submitted to
the Court for approval not later than _____(90 days after the first
anniversary of the appointment of the Guardian).

8. Bond. Bond is currently set in the amount of \$ _____. The amount of the bond
 shall not be changed shall be changed to \$ _____.

9. Guardian Fees. The Guardian fees in the amount of \$_____ for services rendered and
\$_____ for costs incurred between _____ and _____

1 are reasonable and approved. They shall be paid from the guardianship assets of the Incapacitated
2 Person. The Guardian is allowed to advance a monthly fee for the next twelve months following the date
3 of appointment of the Guardian up to \$_____ per month, subject to review and
4 approval by the Court at the next regular accounting. No presumption that these fees will be approved as
5 reasonable is created by this authorization for advance. Amounts shall be advanced only for actual
6 services provided, and costs actually incurred.

7 **10. Attorney Fees and Costs.** Attorney fees in the amount of \$_____ and costs in
8 the amount of \$_____ are hereby approved as reasonable. They shall be
9 paid from the guardianship assets of the Incapacitated Person, from the participation of the Incapacitated
10 Person as an exception to policy, or other: _____.

11 **11. Other.**

12 DATED AND SIGNED IN OPEN COURT THIS _____ DAY OF _____, 200____.

13 _____
14 JUDGE/COURT COMMISSIONER

15 Presented by:

16 _____
17 Signature of Guardian

18 _____
19 Printed Name of Guardian, WSBA/CPG#

20 _____
21 Address

22 _____
23 Telephone/Fax Number

24 _____
25 City, State, Zip Code

_____ Email Address