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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.:**
)
) **PETITION FOR INSTRUCTIONS**
)
) Clerk's code: **(PTINS)**
_____,)
An Incapacitated Person.)
_____)

- 1. **Relief Requested.** An Order of Instructions regarding authority of the Guardian.
- 2. **Statement of Facts.** The undersigned Guardian was appointed by this Court on _____ (date). The following situation exists, necessitating instructions from the Court: _____
- 3. **Issue.** Whether the Guardian should: _____
- 4. **Evidence Relied Upon.** The statements herein, the Court file, and oral presentation.
- 5. **Authority.** (Cite any statutes or cases that may be applicable).

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 of Guardian	_____ Printed Name
_____ Address	_____ Telephone/Fax Number
_____ City, State, Zip Code	_____ Email Address