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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.:**  
)  
) **RETURN ON SALE OF REAL**  
) **PROPERTY**  
)  
\_\_\_\_\_, ) **Clerk's code: (RTSL)**  
An Incapacitated Person.)  
\_\_\_\_\_)

COMES NOW the Guardian and makes the return on the sale of certain property belonging to the estate, as follows:

In compliance with the Order Authorizing Sale entered in this Court on \_\_\_\_\_, the Guardian caused due and proper notice to be given of such sale by publication as required by law for a sale by negotiation of real property. Such notice included the legal description of said property, the selling price, and the date on which said sale would be presented to the Court for confirmation. Said selling price is at least 90 percent of the appraised value. An Affidavit of Publication has been filed or will be submitted to the Court at time of hearing.

WHEREFORE, the Guardian prays for an order confirming the sale and directing the Guardian to execute to the purchaser, \_\_\_\_\_, a proper deed together with other documents necessary to complete the sale of said real property, which is legally described as set forth in Exhibit A, and commonly known as: \_\_\_\_\_

1 The Guardian further prays for an order authorizing the Guardian to pay, out of the proceeds realized  
2 from the sale of said property, or out of the estate, the customary and reasonable expenses for title  
3 insurance, real estate taxes, revenue stamps, excise tax, brokerage fee, and closing costs in connection  
4 with said sale, and to utilize the remaining proceeds of sale as previously ordered by the Court.

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

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

8 \_\_\_\_\_  
9 Signature of Attorney/Guardian

\_\_\_\_\_ Printed Name of Attorney/Guardian, WSBA#

10 \_\_\_\_\_  
11 Address

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

12 \_\_\_\_\_  
13 City, State, Zip Code

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