Superior Court of Washington, County of King

		No.	
Petitioner	DOB	Declaration of	(Name)
V.		(DCLR)	(Name)
Respondent	DOB		
This declaration is made by:			
Age:			
Relationship to the parties in	this action:		
I declare,			

(Attach additional single-sided pages Statement.)	s if necessary an	d number them. Use form PO 010,
I certify under penalty of perjury under true and correct. [] I have attached (note that the correct is a second correct.		
Signed at (City)	(State)	on (<i>Date</i>)
Signature of Declarant	Print o	or Type Name