IN THE SUPERIOR COURT OF THE STATE	OF WASHINGTON FOR THE COUNTY OF KING
In the Settlement/ Guardianship/ Estate of:	) ) Cause N° ) ) PETITION & DECLARATION ) FOR WITHDRAWAL FROM ) BLOCKED ACCOUNT )
1. Identity of Petitioner, Funds to Be Wi	thdrawn and Reason for Withdrawal.
custodian of the funds of the above-name a court order authorizing a withdrawal from the following named financial institution:	or Guardian ad Litem in this action. I am the ded Incapacitated Person. At this time I am seeking maccount No held at for the following reason or purpose(s):
(date). □ I am t appointed Guardian or Guardian ad Litem.	above reached became 18 years old on the person named above or   I am seeking to have the blocked account funds
distributed and to have the Guardianship account statement.	terminated. I am attaching a copy of a current

2. Documents Required to Be Submitted with Petition for Withdrawal for Any Reason Other than the Incapacitated Person Reaching Age 18:

I understand that according to law [RCW 11.92.040(3)], I am required to provide an Inventory and Accounting prior to the court's considering this withdrawal. **Attached to this application is:** 

- (1) An Inventory of Assets which came into my hands at the time I was appointed in this proceeding;
- (2) An Accounting of all income, receipts, and expenditures received or made from the date of the Inventory or the date of the last Accounting.
- (3) If the person requesting the withdrawal is the parent of the Incapacitated Person who is a minor and the reason for the withdrawal is other than because the minor reached 18 years of age, also attach a Financial Statement of my spouse and myself, which demonstrates why we are not able to pay for the item or service for which we are seeking this withdrawal.

## 3. Statement Regarding Repayment.

The funds withdrawn	
□ shall not be subject to repayment,	or
□ shall be repaid according to the fo	llowing terms:
I declare under penalty of perjury, according to the is true and correct.	laws of Washington State that the foregoing
Date signed:	
City or County in which this document was signed: _	, Washington.
Signature	Printed Name
Address	Telephone No