

**Superior Court of Washington
County of _____**

In the Guardianship of:

_____,
Incapacitated Person

No. _____

**Final Order Confirming Transfer
and Terminating Washington
Guardianship
(ORDGNOW)
RCW 11.90.400(6)**

I. Findings

- 1.1 A *Petition to Transfer Guardianship from Washington to the Receiving State of _____* was filed.
- 1.2 The court signed a *Provisional Order Granting Petition to Transfer Guardianship to the Receiving State*.
- 1.3 The guardian petitioned for guardianship in the receiving state.
- 1.4 The receiving state issued a provisional order accepting transfer of guardianship under provisions similar to RCW 11.90.410.
- 1.5 The guardian filed a certified copy of the receiving state's provisional order.
- 1.6 The guardian has has not filed a final report and accounting.

II. Order

- 2.1 The guardianship is transferred to the Receiving State of _____.
- 2.2 The Washington guardianship of the person and/or estate is terminated.
- 2.3 The guardian will be discharged upon entry of an *Order Approving Guardian's Final Report*, form GDN 06.0700.

Dated: _____

Judge/Court Commissioner

Presented by:

Signature of Guardian/Attorney

Printed Name of Guardian/Attorney, WSBA/CPG#

Address

City State, Zip Code

*Telephone/Fax Number

Email Address

* **Privacy notice:** If you do not want your personal phone number on this public form, you may list your telephone number on a separate form which may be available to parties and the court, as well as its staff and volunteers, but will not be made available to the public. Use Form WPF GDN 03.0100, Guardianship Confidential Information form (Telephone Numbers), for this purpose.