

**Superior Court of Washington, County of \_\_\_\_\_**

In the Guardianship of:

\_\_\_\_\_  
Respondent/s (*minors/children*)

No.

**Cover Sheet for Criminal History  
(Guardianship)  
(XCRIM)**

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**Cover Sheet for Criminal History  
(Guardianship)**

I have asked the Washington State Patrol for the criminal history record on each adult living in my home. Attached are the records I received.

List all people whose records are attached:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

\_\_\_\_\_  
*Submitted by (signature)*

\_\_\_\_\_  
*Print name*

\_\_\_\_\_  
*Date*