

Superior Court of Washington, County of _____

In re custody of:

Children:

Petitioner/s (*person/s who started this case*):

Respondents (*parents and any guardian or custodian*):

No. _____

Residential Schedule (Non-Parent Custody)
(PRS / TRS / RS)

[x] Clerk's action required: **1**

Residential Schedule (Non-Parent Custody)

- 1.** This residential schedule is a (*check one*):
 - Proposal** (request) by a party (*name/s*): _____
It is not a signed court order. (PRS)
 - Court order** signed by a judge or commissioner. This is a (*check one*):
 - Temporary order. (TRS)
 - Final order. (RS)
 - This final residential schedule changes the last final residential schedule.

2. Custody – The Petitioner/s is/are granted custody of the following children:

| Child's name | Age | Child's name | Age |
|--------------|-----|--------------|-----|
| 1. | | 4. | |
| 2. | | 5. | |
| 3. | | 6. | |

3. Reasons for limiting a parent's visitation (under RCW 26.10.160)

a. (*Parent's name*): _____

Abandonment, neglect, child abuse, domestic violence, assault, or sex offense.

(If this parent has any of these problems, the court **must** limit his or her contact with the children and right to make decisions for the children.)

- This parent does **not** have any of these problems. (Skip to **3.b.**)
- This parent has one or more of these problems as follows (check all that apply):
 - Abandonment** – S/he intentionally abandoned a child listed in **2** for an extended time.
 - Neglect** – S/he substantially refused to perform his/her parenting duties for a child listed in **2**.
 - Child Abuse** – S/he (or someone living in his/her home) abused or threatened to abuse a child. The abuse was (check all that apply): physical sexual repeated emotional abuse.
 - Domestic Violence** – S/he (or someone living in his/her home) has a history of domestic violence as defined in RCW 26.50.010.
 - Assault** – S/he (or someone living in his/her home) has assaulted or sexually assaulted someone causing grievous physical harm or fear of such harm.
 - Sex Offense** –
 - S/he has been convicted of a sex offense as an adult.
 - Someone living in this parent’s home has been convicted as an adult or adjudicated as a juvenile of a sex offense.
 - Other (specify):** _____

b. (Parent’s name): _____

Abandonment, neglect, child abuse, domestic violence, assault, or sex offense.

(If this parent has any of these problems, the court **must** limit his or her contact with the children and right to make decisions for the children.)

- This parent does **not** have any of these problems. (Skip to **4.**)
- This parent has one or more of these problems as follows (check all that apply):
 - Abandonment** – S/he intentionally abandoned a child listed in **2** for an extended time.
 - Neglect** – S/he substantially refused to perform his/her parenting duties for a child listed in **2**.
 - Child Abuse** – S/he (or someone living in his/her home) abused or threatened to abuse a child. The abuse was (check all that apply): physical sexual repeated emotional abuse.
 - Domestic Violence** – S/he (or someone living in his/her home) has a history of domestic violence as defined in RCW 26.50.010.
 - Assault** – S/he (or someone living in his/her home) has assaulted or sexually assaulted someone causing grievous physical harm or fear of such harm.
 - Sex Offense** –
 - S/he has been convicted of a sex offense as an adult.

- Someone living in this parent's home has been convicted as an adult or adjudicated as a juvenile of a sex offense.
- Other (specify):** _____

4. Limitations on visitation

a. (Parent's name): _____

- Does not apply. There are no reasons for limitations checked in **3.a.** above. (Skip to **4.b.**)
- Because of the limiting factors checked in **3.a.** above, this parent has visitation as follows (check all that apply):
 - No visitation with the children.
 - Limited visitation as shown in the Parents' Visitation Schedule (**5 – 8**) below.
 - Limited visitation as follows (specify schedule, list all contact here **instead of in a Parents' Visitation Schedule, skip sections 5 – 8**): _____

Supervised visitation. All visits shall be supervised. Any costs of supervision must be paid by (name): _____

The supervisor shall be:

- a professional supervisor (name): _____
- a non-professional supervisor (name): _____

The dates and times of supervised contact will be:

- as shown in the Parents' Visitation Schedule (sections **5 – 8**) below.
- as follows (specify): _____

(Specific rules for supervision, if any): _____

Other limitations or conditions during visitation (specify): _____

Evaluation or treatment required. This parent must:

- be evaluated for: _____.
- start (or continue) and comply with treatment:
 - as recommended by the evaluation.
 - as follows (specify kind of treatment and any other details): _____

provide a copy of the evaluation and compliance reports (*specify details*): _____

If this parent does not follow the evaluation or treatment requirements above, then (*what happens*): _____

No limitations despite reasons. Despite the limiting factors checked in **3.a.** above, there should be no limitations or conditions on this parent's visitation because the limiting factors do not involve a sex offense and (*check one or more*):

the parent's past conduct checked above did not affect the children.

contact with the children will not cause them physical, sexual, or emotional harm, and it is so unlikely that the parent will behave in a harmful or abusive way again that it is not in the children's best interest to limit visitation.

b. (Parent's name): _____

Does not apply. There are no reasons for limitations checked in **3.b.** above. (*Skip to Parents' Visitation Schedule.*)

Because of the limiting factors checked in **3.b.** above, this parent has visitation as follows (*check all that apply*):

No visitation with the children.

Limited visitation as shown in the Parents' Visitation Schedule (**5 – 8**) below.

Limited visitation as follows (*specify schedule, list all contact here instead of in a Parents' Visitation Schedule, skip sections 5 – 8*): _____

Supervised visitation. All visits shall be supervised. Any costs of supervision must be paid by (*name*): _____

The supervisor shall be:

a professional supervisor (*name*): _____

a non-professional supervisor (*name*): _____

The dates and times of supervised contact will be:

as shown in the Parents' Visitation Schedule (sections **5 – 8**) below.

as follows (*specify*): _____

(*Specific rules for supervision, if any*): _____

Other limitations or conditions during visitation (*specify*): _____

Evaluation or treatment required. This parent must:

be evaluated for: _____.

start (or continue) and comply with treatment:

as recommended by the evaluation.

as follows (*specify kind of treatment and any other details*): _____

provide a copy of the evaluation and compliance reports (*specify details*): _____

If this parent does not follow the evaluation or treatment requirements above, then (*what happens*): _____

No limitations despite reasons. Despite the limiting factors checked in **3.b.** above, there should be no limitations or conditions on this parent's visitation because the limiting factors do not involve a sex offense and (*check one or more*):

the parent's past conduct checked above did not affect the children.

contact with the children will not cause them physical, sexual, or emotional harm, and it is so unlikely that the parent will behave in a harmful or abusive way again that it is not in the children's best interest to limit visitation.

➤ **Parents' Visitation Schedule**

Check one:

Skip the parents' visitation schedule in sections **5 - 8** if both parents have no contact with the children other than what is described in section **4** – Limitations.

The children live with the Petitioner/s except as described in section **4**.

Complete the parents' visitation schedule in sections **5 - 8**.

5. School Schedule

a. Children under School-Age

Does not apply. All children are school-age.

The schedule for children under school-age is the same as for school-age children.

Children under school-age will live with Petitioner/s except when they are scheduled to be with a parent.

Parent (name): _____'s visitation schedule is
(*check all that apply*):

WEEKENDS: every week every other week other (specify): _____
from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
 OTHER (specify): _____

Parent (name): _____'s visitation schedule is
(check all that apply):

WEEKENDS: every week every other week other (specify): _____
from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
 OTHER (specify): _____

Other (specify): _____

b. School-Age Children

This schedule will apply (check one):

immediately.

when the youngest child enters (check one): Kindergarten 1st grade

when the oldest child enters (check one): Kindergarten 1st grade

Other: _____

The children will live with the Petitioner/s except when they are scheduled to be with a parent.

Parent (name): _____'s visitation schedule is
(check all that apply):

WEEKENDS: every week every other week other (specify): _____
from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
 OTHER (specify): _____

Parent (name): _____'s visitation schedule is
(check all that apply):

WEEKENDS: every week every other week other (specify): _____
from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.
 OTHER (specify): _____

Other (specify): _____

6. Summer Schedule

Summer begins and ends according to the school calendar. as follows: _____

The Summer Schedule is the **same** as the School Schedule. (*Skip to 7.*)

The Summer Schedule is the **same** as the School Schedule **except** that (name/s): _____ shall spend _____ weeks of uninterrupted vacation time with the children each summer. The parties shall confirm their vacation schedules in writing by the end of (date) _____ each year. (*Skip to 7.*)

The Summer Schedule is **different** than the School Schedule. The Summer Schedule will begin the summer before:

(check one): the youngest child the oldest child each child

begins (check one): Kindergarten 1st grade Other: _____

During the summer, the children will live with the Petitioner/s except when they are scheduled to be with a parent.

Parent (name): _____'s visitation schedule is (check all that apply):

WEEKENDS: every week every other week other (specify): _____

from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.

from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.

OTHER (specify): _____

Parent (name): _____'s visitation schedule is (check all that apply):

WEEKENDS: every week every other week other (specify): _____

from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.

from (day) _____ at ____:____.m. to (day) _____ at ____:____.m.

OTHER (specify): _____

7. Holiday Schedule (includes school breaks)

The Holiday Schedule is the **same** as the School and Summer Schedules above for all holidays and school breaks. (*Skip to 8.*)

This is the Holiday Schedule for all children school-age children only.

The children will be with the **Petitioner/s** for all holidays and school breaks **except** as listed below. (*Put one parent's name in each column and fill out when the children will be with that parent for holidays and school breaks.*)

| Holiday | Children with (name): | Children with (name): |
|----------------------------|--|---|
| Martin Luther King Jr. Day | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> With the person who has the children for the attached weekend <input type="checkbox"/> Other plan: | |
| | | |
| Presidents' Day | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> With the person who has the children for the attached weekend <input type="checkbox"/> Other plan: | |
| | | |
| Mid-winter Break | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Each person has the children for the half of the break attached to his/her weekend. The children must be exchanged on Wednesday at (time): _____. | |
| | <input type="checkbox"/> Other plan: | |
| Spring Break | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Each person has the children for the half of the break attached to his/her weekend. The children must be exchanged on Wednesday at (time): _____. | |
| | <input type="checkbox"/> Other plan: | |
| Mother's Day | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Other plan: | |
| | | |
| Memorial Day | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> With the person who has the children for the attached weekend <input type="checkbox"/> Other plan: | |
| | | |

| Holiday | Children with (name): | Children with (name): |
|--------------------------|---|---|
| Father's Day | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Other plan: | |
| | | |
| Fourth of July | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Follow the Summer Schedule in section 6 . | |
| | <input type="checkbox"/> Other plan: | |
| Labor Day | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> With the person who has the children for the attached weekend | |
| | <input type="checkbox"/> Other plan: | |
| Thanksgiving Day / Break | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Other plan: | |
| | | |
| Winter Break | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Other plan: | |
| | | |
| Christmas Eve | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Follow the Winter Break schedule above. | |
| | <input type="checkbox"/> Other plan: | |

| Holiday | Children with (name): | Children with (name): |
|---|---|---|
| Christmas Day | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Follow the Winter Break schedule above. <input type="checkbox"/> Other plan: _____ | |
| | | |
| New Year's Eve / New Year's Day <i>(odd/even is based on New Year's Eve)</i> | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Follow the Winter Break schedule above. <input type="checkbox"/> Other plan: _____ | |
| | | |
| Children's Birthdays | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Other plan: _____ | |
| | | |
| All three-day weekends not listed elsewhere | <i>(Federal holidays, school in-service days, etc.)</i> <input type="checkbox"/> The children shall spend any unspecified holiday or non-school day with the person who has them for the attached weekend. <input type="checkbox"/> Other plan: _____ | |
| Other occasion important to the family: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Other plan: _____ | |
| | | |
| Other occasion important to the family: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ | <input type="checkbox"/> Odd Years <input type="checkbox"/> Even Years <input type="checkbox"/> Every Yr. Begin day/time: _____ End day/time: _____ |
| | <input type="checkbox"/> Other plan: _____ | |
| | | |

8. Conflicts in Scheduling

The Holiday Schedule must be observed over all other schedules. If there are conflicts within the Holiday Schedule (*check all that apply*):

Named holidays shall be followed before school breaks.

Children's birthdays shall be followed before named holidays and school breaks.

Other (*specify*): _____

9. Transportation Arrangements

The children will be exchanged for visitation (picked up and dropped off) at:

each party's home.

school or day care when in session.

other location (*specify*): _____.

Who is responsible for arranging transportation?

The **picking up** party – The person who is about to **start** time with the children must arrange to have the children picked up.

The **dropping off** party – The person whose time is **ending** must arrange to have the children dropped off.

All transportation will be arranged by (*name*): _____.

Other details (if any): _____

10. Moving with the Children (Relocation)

Anyone with majority or substantially equal residential time (at least 45 percent) who wants to move with the children **must notify** every other person who has court-ordered time with the children.

Move to a different school district

If the move is to a different school district, the custodian must complete the form *Notice of Intent to Move with Children* (FL Relocate 701) and deliver it at least **60 days** before the intended move.

Exceptions:

- If the custodian could not reasonably have known enough information to complete the form in time to give 60 days' notice, the custodian must give notice within **5 days** after learning the information.
- If the custodian is relocating to a domestic violence shelter or moving to avoid a clear, immediate and unreasonable risk to health or safety, notice may be delayed **21 days**.
- If information is protected under a court order or the address confidentiality program, it may be withheld from the notice.
- A custodian who believes that giving notice would put her/himself or a child at unreasonable risk of harm, may ask the court for permission to leave things out of the notice or to be allowed to move without giving notice. Use form *Motion to Limit Notice of Intent to Move with Children (Ex Parte)* (FL Relocate 702).

The *Notice of Intent to Move with Children* can be delivered by having someone personally serve the other party or by any form of mail that requires a return receipt.

If the custodian wants to change the *Parenting Plan* because of the move, s/he must deliver a proposed *Parenting Plan* together with the *Notice*.

Move within the same school district

If the move is within the *same* school district, the custodian still has to let the other parent know. However, the notice does not have to be served personally or by mail with a return receipt. Notice to the other party can be made in any reasonable way. No specific form is required.

Warning! If you do not notify...

A custodian who does not give the required notice may be found in contempt of court. If that happens, the court can impose sanctions. Sanctions can include requiring the custodian to bring the children back if the move has already happened, and ordering the custodian to pay the other side's costs and lawyer's fees.

Right to object

A person who has court-ordered time with the children can object to a move to a different school district and/or to the custodian's proposed *Parenting Plan*. If the move is within the same school district, the other party doesn't have the right to object to the move, but s/he may ask to change the *Parenting Plan* if there are adequate reasons under the modification law (RCW 26.09.260).

An objection is made by filing the *Objection about Moving with Children and Petition about Changing a Parenting/Custody Order (Relocation)* (form FL Relocate 721). File your *Objection* with the court and serve a copy on the custodian and anyone else who has court-ordered time with the children. Service of the *Objection* must be by personal service or by mailing a copy to each person by any form of mail that requires a return receipt. The *Objection* must be filed and served no later than **30 days** after the *Notice of Intent to Move with Children* was received.

Right to move

During the 30 days after the *Notice* was served, the custodian may not move to a different school district with the children unless s/he has a court order allowing the move.

After the 30 days, if no *Objection* is filed, the custodian may move with the children without getting a court order allowing the move.

After the 30 days, if an *Objection* has been filed, the custodian may move with the children **pending** the final hearing on the *Objection* **unless**:

- The other party gets a court order saying the children cannot move, or
- The other party has scheduled a hearing to take place no more than 15 days after the date the *Objection* was served on the custodian. However, the custodian may ask the court for an order allowing the move even though a hearing is pending if the custodian believes that s/he or a child is at unreasonable risk of harm.

▪

The court may make a different decision about the move at a final hearing on the *Objection*.

Parenting Plan after move

If the custodian served a proposed *Parenting Plan* with the *Notice*, **and** if no *Objection* is filed within 30 days after the *Notice* was served (or if the parties agree):

- Both parties may follow that proposed plan without being held in contempt of the *Parenting Plan* that was in place before the move. However, the proposed plan cannot be enforced by contempt unless it has been approved by a court.

- Either party may ask the court to approve the proposed plan. Use form *Ex Parte Motion for Final Order Changing Parenting Plan – No Objection to Moving with Children* (FL Relocate 706).

Forms

You can find forms about moving with children at:

- The Washington State Courts’ website: *www.courts.wa.gov/forms*,
- The Administrative Office of the Courts – call: (360) 705-5328,
- Washington LawHelp: *www.washingtonlawhelp.org*, or
- The Superior Court Clerk’s office or county law library (for a fee).

(This is a summary of the law. The complete law is in RCW 26.09.430 through 26.09.480.)

11. Other

12. Proposal

- Does not apply. This is a court order.
- This is a **proposed** (requested) residential schedule. *(The person/s requesting this schedule must read and sign below.)*

I declare under penalty of perjury under the laws of the state of Washington that this schedule was proposed in good faith and the information in section **3** above is true.

▶ _____ Signed at *(city and state)*

Person requesting schedule signs here

▶ _____ Signed at *(city and state)*

Other person requesting sched. (if agreed) signs here

13. Court Order

- Does not apply. This is a proposal.
- This is a court order (if signed by a judge or commissioner below).

Findings of Fact – Based on the pleadings and any other evidence considered:

The Court adopts the statements in section **3** (Reasons for limiting a parent’s visitation) as its findings.

- The Court makes additional findings which are:
 - contained in an order or findings of fact entered at the same time as this *Residential Schedule*.
 - attached as Exhibit A as part of this *Residential Schedule*.
 - other: _____

Conclusions of Law – This *Residential Schedule* is in the best interest of the children.

Other: _____

Order – The parties must follow this *Residential Schedule*.

Date

Judge or Commissioner signs here

Warning! If you don't follow this *Residential Schedule*, the court may find you in contempt (RCW 26.09.160). You still have to follow this *Residential Schedule* even if the other party doesn't. Violation of **residential** provisions of this order with actual knowledge of its terms is punishable by contempt of court and may be a criminal offense under RCW 9A.40.060(2) or 9A.40.070(2). Violation of this order may subject a violator to arrest.

If this is a court order, the parties and/or their lawyers (and any GAL) sign below.

This order (*check any that apply*):

is an agreement of the parties.

is presented by me.

may be signed by the court without notice to me.

This order (*check any that apply*):

is an agreement of the parties.

is presented by me.

may be signed by the court without notice to me.

Petitioner signs here **or** lawyer signs here + WSBA #

Respondent signs here **or** lawyer signs here + WSBA #

Print Name

Date

Print Name

Date

This order (*check any that apply*):

is an agreement of the parties.

is presented by me.

may be signed by the court without notice to me.

This order (*check any that apply*):

is an agreement of the parties.

is presented by me.

may be signed by the court without notice to me.

Other party **or** lawyer signs here + WSBA #

Other party **or** Guardian ad Litem signs here

Print Name

Date

Print Name

Date