Superior Court of Washington, County <i>华盛顿州 县高等法院</i>	of
In the Guardianship/Conservatorship of: <i>关于以下个人的监护/保护:</i>	No
	Receipt of Funds into Blocked Financial Account 资金存入受限金融账户的确认收据
Respondent/Minor 被申请人/未成年人	(RCP)

资金存入受限金融账户的确认收据

Receipt is hereby acknown	wledged of \$, deposited with t who is the [] Gu		d by
[] Conservator, [] Visitor, [] Agent or [] Attorney for (name of Respondent)				
	The deposit w	as made into Account No. (last	four digits)	
兹确认 收到 金额为	的资金,由下列	1人员存入本机构账户:		
	存入人身份为[-	·]监护人,[-]保护人,[-]视察员,	[-]代理人,或[-]律师,
代表(被申请人姓名)。	上述资金已存入	、账户(账号后四位数)		

The undersigned financial institution agrees to hold this account, and any subsequent deposits to this account, and not to allow any withdrawals of the funds or securities from the institution, except under Order of this court. However, the institution may move the funds into different accounts, securities, or investment vehicles without prior court order, provided the proceeds are not released from the control of the institution as a part of the transfer or transaction.

本金融机构同意将该账户及其后续存款纳入监管,并严格限制任何资金或证券的提取,除非经本 法院明确授权。然而,本机构可在不影响资金控制权的前提下,自主决定将资金转移至其他账 户、证券或投资工具,无需事先获得法院命令,但所有资金转移均需确保资金始终处于本机构的 控制之下。

This receipt is binding on all successors, transferees, assignees, agents, and employees of the undersigned financial institution.

本确认书对本金融机构及其所有继任者、受让人、受托人、代理人和员工具有同等法律约束力。

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

本人特此声明,以上陈述属实且正确。若有不实之词,愿依照华盛顿州法律而接受伪证罪处罚。				
Signed at <i>(city)签署地点(城市)</i>	, (state) on (date) ,(州) (日期)			
Signature 签名	Print Name and Title 印刷体姓名和职务			
Name of Bank/Financial Institution 银行/金融机构名称	Telephone/Fax Number 电话/传真号码			
City, State, Zip Code 城市,州,邮政编码	Email Address 电子邮件地址			