**Superior Court of Washington, County of**

***华盛顿州 县高等法院***

|  |  |
| --- | --- |
| In the Guardianship/Conservatorship of:*关于以下个人的监护/保护：*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Individual*个人* | **No**. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***编号*** **Order Closing Guardianship/ Conservatorship and Discharging Guardian/ Conservator*****终止监护权/保护权并解除监护人/保护人资格令*** [ ] **Death of Individual** (ORTD)***个人死亡****(ORTD)*[ ] **Capacity Returned** (ORTAR)***能力恢复****(ORTAR)***Clerk’s Action Required: 6*****书记员需要采取的行动：6*** |

**Order Closing Guardianship/ Conservatorship and
Discharging Guardian/ Conservator**

***终止监护权/保护权并
解除监护人/保护人资格令***

The court, having heard the motion to close the guardianship/conservatorship and discharge the guardian/conservator, orders:

*法院在听取了终止监护权/保护权并解除监护人/保护人资格的请求后，命令：*

**1.** The guardianship/conservatorship is closed due to the [ ] death [ ] return to capacity
of the Individual.

*由于个人[-]死亡[-]能力恢复监护权/保护权终止。*

[ ] The conservator is appointed as personal representative to administer the descendant’s estate because it has been 40 days since the Individual’s death and no one has petitioned the court to start a probate and have a personal representative appointed.

 *保护人被指定为个人代表来管理后代的遗产，因为自此人去世已过去40天，但无人向法院申请启动遗产认证程序或任命个人代表。*

**2.** The guardian/conservator is discharged.

 *监护人/保护人被解除。*

**3.** The Bond in the amount of $ with (insurer) identified by bond number is exonerated.

 *保函金额为$*  *提供方（保险公司）*   *保函编号*   *现予解除。*

**4**. Guardian/Conservator fees in the total amount are approved and shall be paid from

 *监护人/保护人的总费用已获批准，将由以下来源支付*

 .

**5**. The guardian/conservator’s attorney fees are approved and shall be paid from

 *监护人/保护人的律师费已获批准，将由以下来源支付*

 .

**6.** The clerk of the court shall:

 *法庭书记员应：*

[ ] close the case.

 *结案。*

[ ] issue Letters [ ] Testamentary [ ] of Administration

 *签发 [-] 遗嘱认证书 [-] 管理人任命书。*

Dated \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*日期：* Judge/Court Commissioner

 *法官/助理法官*

Presented by:

*提交人：*

Signature of Guardian/Attorney Print Name [ ] WSBA# [ ]CPG#

*监护人/律师签名* *请工整填写姓名* *[-] WSBA# [-]CPG#*