**Superior Court of Washington, County of**

***华盛顿州 县高等法院***

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| --- | --- |
| In the Guardianship/Conservatorship of:  *关于以下个人的监护/保护：*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,  Respondent.  *被申请人。* | No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *编号*  **Notice of Right to Object to Guardian/Conservator’s Plan (RCW 11.130.340/RCW 11.130.510)**  ***反对监护人/保护人计划的权利通知(RCW 11.130.340/RCW 11.130.510)*** |

**Notice of Right to Object to Plan**

***反对计划的权利通知***

To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Respondent.

*至：* ，*被申请人。*

To: All Other Persons Entitled to Notice

*至：* *所有其他有权获得通知的人员*

The Guardian/Conservator filed a *Plan* on *(date)* . The court cannot approve the plan until 30 days after filing. A copy of the plan accompanies this notice.

*监护人/保护人于以下日期提交了计划（日期）*  *。法院在提交后30天后才能批准该计划。本通知附有该计划的副本。*

You have a right to object to the plan. Your objection must contain the case number and the name of the Respondent. You must sign your objection and provide your full name, mailing address, phone number, and email address.

*您有权反对该计划。您的反对意见必须包含案件编号和被申请人的姓名。您必须签署反对意见并提供您的全名、邮寄地址、电话号码和电子邮件地址。*

Objections to the plan must be mailed or delivered to court. You must also provide copies of objections to the Guardian/Conservator as follows:

*对计划的异议必须邮寄或交付给法院。您还必须向如下监护人/保护人提供异议副本：*

Name:

*姓名：*

Mailing Address:

*邮寄地址：*

City, State, Zip:

*城市、州、邮政编码：*

Phone: Email:

*电话：*  *电子邮件地址：*

Dated: Signed:

*日期：*  *签名：*

Print Name:

*请工整填写姓名：*