SUPERIOR COURT OF WASHINGTON FOR ______ COUNTY

Estate of	NO
,	NOTICE OF APPOINTMENT OF PERSONAL REPRESENTATIVE AND PENDENCY OF PROBATE TO WDSHS & DECLARATION OF MAILING (RCW 11.28.237(2))
Deceased.	

To: Office of Financial Recovery Washington Department of Social and Health Services PO Box 9501 Olympia, WA 98507-9501

PLEASE TAKE NOTICE

On ______, the above Court began probate proceedings for and appointed as Personal Representative of Decedent's estate.

,

Decedent's Social Security Number is _____.

Dated:				
Dated:				

Signed: _____

Personal Representative

Notice of Appointment of Personal Representative and Pendency of Probate to WDSHS RCW 11.28.237(2) Page 1 of 2

DECLARATION OF MAILING

In accordance with RCW 9A.72.085, I declare under penalty of perjury under the laws of the State of Washington that on the date written below, I mailed by first-class mail of the US Postal Service, postage prepaid, a true and correct copy of this

Notice of Appointment of Personal Representative and Pendency of Probate to WDSHS & Declaration of Mailing

To:

Office of Financial Recovery Washington Department of Social and Health Services PO Box 9501 Olympia, WA 98507-9501

SIGNED

Date: On _____

Place: At _____

Signature: _____

Personal Representative