SUPERIOR COURT OF WASHINGTON FOR COUNTY OF

☐ **ISLAND** ☐ **SKAGIT** ☐ **SNOHOMISH** ☐ **WHATCOM** ☐ **OTHER** _____

IN RE DETENTION OF:	)	**NO.** _____
	)	
RESPONDENT: _____	)	**DECLARATION OF WITNESS**
	)	
DOB: _____	)	
	)	

My relationship to the above individual is: _____.**I have known the Respondent since:** _____.

Date of most recent contact: _____. ☐ **In Person** ☐ **By Phone**
☐ **Other** _____

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

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

I am willing to testify to the above facts in any subsequent judicial proceedings.

City/Town: _____ Dated this _____ day of _____, 20____ .

_____ _____

Witness Printed Name Witness Signed Name

_____ _____

Phone Number Phone Number