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2021 JUN -3 A 11: 54

SUPERIOR COURT OF WA.
SHARON K. FOGO

Superior Court of Washington, County of Mason

BY AP2 DEPUTY

Carolee Pailes Guardian
Petitioner

No. 21-4-00040-23

Guardian of Virginia Jackson
Respondent

Notice of Hearing
(NTHG)

Clerk's action required

21-4-00040-23
NTHG 41
Notice of Hearing
10417215



Notice of Hearing

To the Court Clerk and all parties:

1. Please take note that a court hearing has been scheduled:

for: June 16, 2021 at: 9:00 a.m. p.m.

ZOOM APPEARANCE during COVID-19 precautions:

Meeting ID # 283 790 6716

By Phone: 1+ (253) 215-8782

By Smart Phone/Computer: <https://us02web.zoom.us/j>

Interpreter needed for Petitioner Respondent Both

Type of Interpreter: Spanish Other _____

2. The purpose of this hearing is (specify): Temporary order Motion for Default Final Order(s)

Other: Right to sell & sell lease

3. The hearing should be scheduled on the following court calendar:

State Family Law
(Wednesday 9:00 a.m.)

Probate &
Guardianship of Adult
Attorney & Self-Represented
(Wednesday 9:00 a.m.)

Family Law without attorneys
Both parties self-represented
(Monday 9:00 a.m.)

Family Law with attorney
(Wednesday 1:30 p.m.)

Adoption
Attorney & Self-Represented
(Wednesday 9:00 a.m.)

Guardianship of Minor &
Relative Visitation
Attorney & Self-Represented
(Friday 1:30 p.m.)

Hearings are to be confirmed by e-mail at superiorcourt-confirm@co.mason.wa.us or by phone at (360) 427-9670 ext. 346 or in person, as required by LCR 7 and LSPR 94.04. Mailing address: Mason County Clerk / P.O. Box 340 / Shelton, WA 98584

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4. Person scheduling this hearing

Petitioner or his/her lawyer Respondent or his/her lawyer

Carolee Paicca
Person asking for this hearing signs here

Print name (if lawyer, also list WSBA #)

6-4-2021
Date

PO BOX 1215
Mailing Address

Hoodsport WA
City/State/Zip

360-463-2063
Phone

paicca.carolee@gmail.com
E-mail Address

Petitioner Respondent: I have received a copy of this document and _____

Person receiving copy signs here

Print name (if lawyer, also list WSBA #)

Date

5. Declaration of Service (not necessary if other party signed above)

I declare that on _____ 20____,

I deposited in the United States mail personally delivered a copy of this notice of hearing along with:

_____ to all the people listed below in section 6.

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

Signed at _____ on _____
City State Date signed

Signature

Printed Name

Names and Contact Information of Everyone Notified of this Hearing

Name: _____

Name: _____

Attorney for: _____

Attorney for: _____

Address: _____

Address: _____

Telephone: _____

Telephone: _____

Email: _____

Email: _____

Name: _____

Name: _____

Attorney for: _____

Attorney for: _____

Address: _____

Address: _____

Telephone: _____

Telephone: _____

Email: _____

Email: _____

Attach more pages if needed.