Doro	on Filing.		
	on Filing:ess (if not protected):		
	State, Zip Code:		
	phone:		
Emai	il Address:		
Lawy	/er's Bar Number:		FOR CLERK'S USE ONL
Licer	nsed Fiduciary Number:		
Repr	esenting 🗌 Self, without a Lawyer or 🗎 Atto	orney for Petitioner OR Responde	nt
		COURT OF ARIZONA MA COUNTY	
In the	e Matter of:		
		Case Number:	
A Deceased Person		WAIVER OF NOTICE OF HEARING ON PETITION FOR FINAL ACCOUNTING	
_	TE OF ARIZONA) INTY OF YUMA) ss		
I stat	te under oath as follows:		
1.	RECEIVED COURT PAPERS. I have court papers: (Check the box next to the deal.) A	ocuments you received.)	
2.	RELATIONSHIP. My relationship to the		
3.	WAIVE NOTICE. I waive all notice of a understand that I can reverse this waiver be number declaring that I no longer waive not	by filing a written document with the court u	under this court case
STATE OF		Signature	
COU	INTY OF		
Subs	scribed and sworn to or affirmed before me this	(date)	by
(nota	ary seal)	Deputy Clerk or Notary Public	<u> </u>