

**SUPERIOR COURT OF THE STATE OF WASHINGTON
COUNTY OF _____**

In The Receivership Of: _____

NO. _____

PROOF OF CLAIM

To: Resource Transition Consultants, LLC, Receiver:
RESOURCE TRANSITION CONSULTANTS, LLC
ATTN: KEVIN HANCHETT
4100 194th Street SW, Suite 208
Lynnwood, WA 98036

1. Creditor Information

Name of Creditor: _____

Address: _____

Telephone Number: _____

E-Mail Address: _____

Your Account No.: _____

2. Basis for Claim (Identify any that apply):

(a) Goods Sold

(b) Services Performed

(c) Money Loan

(d) Personal Injury/Wrongful Death

(e) Taxes

(f) Other _____

3. TOTAL AMOUNT OF CLAIM: \$ _____

Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, or evidence of perfection of liens. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

Signature: _____

Title: _____

Date: _____