CLAIM FOR INDEBTEDNESS OF STATE OF WASHINGTON TO DECEASED EMPLOYEE
MULTIPLE CHILDREN
RCW 49.48.120
(AFFIDAVIT FORM)

STATE OF WASHINGTON
___________________________________________ COUNTY
_______________________________________ Fund

1. In the matter of the amounts due to the deceased employee _________________________________________ employed by
    _______________________________________________ of the state of Washington at the time of his/her death.

2. We are the children of the deceased.

3. We, the undersigned, agree that our sibling _________________________ shall accept the entire amount due to the deceased
   on our behalf.

4. No personal representative, executor or administrator of the deceased employee’s estate has been appointed.

5. Claim is made for the amount due to the deceased employee for labor, services performed and/or expense reimbursements or
   allowances.

Signature of Claimant ___________________ Date ____________

Subscribed to and sworn before me this ______________ day of ____________, 20 ___.

Notary Public for the state of Washington, residing at

_________________________________________

Signature of Claimant ___________________ Date ____________

Subscribed to and sworn before me this ______________ day of ____________, 20 ___.

Notary Public for the state of Washington, residing at

_________________________________________

OFM 06/2018
CLAIM FOR INDEBTEDNESS OF STATE OF WASHINGTON TO DECEASED EMPLOYEE
MULTIPLE CHILDREN - continued

______________________________________________
Signature of Claimant Date

Subscribed to and sworn before me this ___________________ day of _______________ , 20 _____ .

______________________________________________
Notary Public for the state of Washington, residing at

______________________________________________
Signature of Claimant Date

Subscribed to and sworn before me this ___________________ day of _______________ , 20 _____ .

______________________________________________
Notary Public for the state of Washington, residing at

Note: Additional signature lines may be added as needed.