

**Superior Court of Washington  
County of**

In re:

and

Petitioner(s),

Respondent(s).

**No.**

**Sealed Personal Health Care  
Records  
(Cover Sheet)  
(SEALPHC)  
Clerk's Action Required**

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**Sealed Personal Health Care Records**

(List documents below and write "Sealed" at least one inch from the top of the first page of each document.)

Records or correspondences that contain health information that:

- Relates to the past, present, or future physical or mental health condition of an individual including past, present, or future payments for health care.
- Involves genetic parentage testing.

Submitted by:

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**Notice: The other party will have access to these health care records. If you are concerned for your safety or the safety of the children, you may redact (block out or delete) information that identifies your location.**