

Form 9. Petition for Review  
[Rule 13.4(d)]

Court of Appeal Cause No.

IN THE SUPREME COURT OF THE STATE OF  
WASHINGTON

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\_\_\_\_\_, Respondent

v.

\_\_\_\_\_, [Petitioner or Appellant]

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PETITION FOR REVIEW

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Name, address, telephone number and  
Washington State Bar Association attorney number

TABLE OF CONTENTS

[See form 6, except modify names of parts of brief to correspond to names of parts of Petition for Review]

TABLE OF AUTHORITIES

[See form 6]

A. Identity of Petitioner

[Name] asks this court to accept review of the Court of Appeals decision \_\_\_\_\_ termination review designated in Part B of this petition.

B. Court of Appeals Decision

[Identify the decision or parts of the decision of the Court of Appeals which the party wants reviewed, the date filed, and the date of any order granting or denying a motion for reconsideration.]

A copy of the decision is in the Appendix at pages A-\_\_\_\_ through \_\_\_\_\_. A copy of \_\_\_\_\_ the order denying petitioner's motion for reconsideration is in the Appendix at pages A-\_\_\_\_ through \_\_\_\_\_.

C. Issues Presented for Review

[Define the issues which the Supreme Court is asked to decide if review is \_\_\_\_\_ granted. See the second portion of Part A of Form 6 for suggestions for framing \_\_\_\_\_ issues presented for review.]

D. Statement of the Case

[See Part B of Form 6]

E. Argument Why Review Should Be Accepted

[The argument should be short and concise and directed to the consideration for accepting review set out in rule 13.4(b). For argument generally, see Part D of Form 6. The argument may be preceded by a summary.]

F. Conclusion

[State the relief sought if review is granted. See Part F of Form 3.]

[Date]

Respectfully submitted,

\_\_\_\_\_  
[Name of Attorney]

Attorney for [Petitioner or Respondent]

Washington State Bar Association membership number