

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS):	TELEPHONE NO.:	FOR COURT USE ONLY
ATTORNEY FOR (Name):		
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA BARBARA</b>		
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
(PROPOSED) CONSERVATORSHIP OF:		
<input type="checkbox"/> PERSON <input type="checkbox"/> LIMITED <input type="checkbox"/> ESTATE		
<b>CONSERVATORSHIP CONTACT INFORMATION</b>		CASE NUMBER:
<b>(CONFIDENTIAL)</b>		HEARING DATE:

PROPOSED    REVIEW    SUCCESSOR CONSERVATOR

**General Directions:** This form must be filed with petitions for the appointment of a conservator, for appointment of a successor conservator, and with subsequent accountings. Add pages if necessary to give complete information.

**1. (PROPOSED) CONSERVATEE**

Name \_\_\_\_\_ Address \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_  
 Telephone Numbers: Residence \_\_\_\_\_ Day Program (if appropriate) \_\_\_\_\_

SPECIAL PROBLEMS RELATED TO INVESTIGATION (i.e. language, personal safety, communication)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NOTE: The Court must be notified immediately of address changes of Conservatees and Conservators.

**2. PETITIONER (if different from Proposed Conservator)**

Name \_\_\_\_\_ Address \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_  
 Telephone Numbers: (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_  
 Relationship to (Proposed Conservatee) \_\_\_\_\_



Insert Case Name:	CASE NUMBER:
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**7. RELATIVES PURSUANT TO PROBATE CODE §1821(B)**

If no spouse or domestic partner of the proposed conservatee or relatives within the second degree are known to the petitioner, please identify:

Spouse or domestic partner of a predeceased parent of a proposed conservatee:

Name	Address	City, State, Zip Code
Telephone Numbers: (home) _____ (work) _____ (cell) _____		

Children of a predeceased spouse or domestic partner of a proposed conservatee (Attach pages if necessary)

Name	Address	City, State, Zip Code
Telephone Numbers: (home) _____ (work) _____ (cell) _____		

Siblings of the proposed conservatee's parents, but if none, then the natural and adoptive children of the proposed conservatee's parent's siblings (Attach pages if necessary)

Name	Address	City, State, Zip Code
Telephone Numbers: (home) _____ (work) _____ (cell) _____		

Nieces and nephews of the proposed conservatee (Attach pages if necessary)

Name	Address	City, State, Zip Code
Telephone Numbers: (home) _____ (work) _____ (cell) _____		

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**8. NEIGHBORS**

Name	(home) _____	(work) _____	(cell) _____
Telephone Numbers			

Name	(home) _____	(work) _____	(cell) _____
Telephone Numbers			

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**9. FRIENDS**

Name	(home) _____	(work) _____	(cell) _____
Telephone Numbers			

Name	(home) _____	(work) _____	(cell) _____
Telephone Numbers			