Choose a location

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA BARBARA STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	*FOR COURT USE ONLY*
GUARDIANSHIP OF: _____ *(Name of Minor)*	
ORDER RE USE OF GUARDIANSHIP FUNDS FOR SUPPORT OF MINOR	CASE NUMBER:

After examining the Petition and related documents, the Court finds and orders:

1. All of the allegations in the Petition are true.

2. There is good cause to withdraw funds from the minor's guardianship account for his or her support as follows:

Purpose	**Amount**
Total:	$

3. The parents of the minor are financially unable to pay for the requested expenditure(s).

4. ☐ Other orders:

Dated: _____

_____
Judge of the Superior Court

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