## QUESTIONNAIRE FOR LIMITED CONSERVATORSHIP PETITION

| ı.   | Proposed Conservatee  |
|------|---|
|      | 1. Name of Conservatee:   |
|      | 2. Is Conservatee a patient or on leave from a state institution or under the authority   |
| 1042 | of California Department of State Hospitals or under the authority of California          |
|      | Department of Developmental Services? □ Y □ N   |
|      | 3. Is Conservatee receiving MediCal benefits? □ Y □ N                                     |
|      | 4. Does Conservatee adhere to a religion that relies on prayer alone for healing?         |
|      | $\Box Y \Box N$   |
|      | 5. Is Conservatee receiving or entitled to receive VA benefits?                           |
|      | $\square Y \square N$   |
|      | <ul> <li>i. If Yes, how is Conservatee qualified (e.g., parent, spouse, self)?</li> </ul> |
|      |   |
|      | a. Name:  |
|      | b. Claim/Serial #:  |
|      | C. Branch/Rank:   |
|      | d. Dates of Service:  |
|      | II. Estimated monthly benefit payable: \$   |
|      | 6. Is Conservatee a member of a federally recognized Indian tribe, as far as you          |
|      | know? □ Y □ N   |
|      | i. If Yes, Name of Tribe  |
|      | ii. Location of Tribe (or state of Principal Location)                                    |
|      | iii. Does Conservatee reside on tribal land? □ Y □ N                                      |
|      | iv. Does Conservatee own property on tribal land, as far as you know? ☐ Y ☐ N             |
|      | 7. Can Conservatee understand and answer a question regarding WHO should be               |
|      | chosen to be the conservator? □ Y □ N   |
|      | If Yes, State Conservatee's preference and why:   |
|      |   |
|      |   |
| II.  | Attendance of Proposed Conservatee at The Hearing   |
|      | 1. Is Conservatee willing to attend? □ Y □ N  |
|      | 2. Able but unwilling to attend?  |
|      | 3. Unable to attend due to medical reasons? ☐ Y ☐ N                                       |
|      | (If Yes, doctor must so indicate in Capacity Declaration)                                 |
|      | to the state of managed in Supulity Decidiation   |

| 1. During the past year, were any health services provided to Conservatee?   |
|--|
| D Y D N  |
| <ol> <li>If Yes, identify the name of the doctors and treatment provided.</li> </ol>   |
| Example:   |
| <ul> <li>a. Dr. Jones is Susie's general doctor, she has annual visits for checkupe</li> <li>b. Dr. Smith is Conservatee's dentist, she has regular visits for cleaning.</li> </ul>  |
|  |
|  |
| 2. If No, explain why health services were not provided in the past year.  |
|  |
|  |
|  |
|  |
| <ul> <li>3. During the past year, were any social services provided to Conservatee?</li> <li>Y N</li> <li>Social Services means assistance programs, such as food programs, educations services, respite care, counseling, social worker, housing assistance etc.</li> <li>i. If Yes, identify the social services. Include the name of the program and type of assistance.</li> </ul> |
| 6  |
|  |
| ii. If No, explain why social services were not provided in the past year.   |
|  |
|  |

|   | same address as Conservator? □ Y □ N       |
|---|--|
| 5. What is the current phone number of                |  |
|   | ed as a Conservator, Guardian, Executor, o |
|   | ry in another proceeding? If you haven't   |
| heard these words before, it probably                 | means the answer is NO.* □ Y □ N           |
| TV TV   |  |
| IV. <u>Conservatee's Diagnosis</u> .                  |  |
| <ol> <li>Is proposed Conservatee Developme</li> </ol> |  |
| i. If Yes, Proposed Conservatee's di                  | agnosis:                                   |
| -   |  |
|   | A 22                                       |
| V. Explaining Why Conservatorship Needed              |  |
| Here is a list of common basic tasks which mi         |  |
| special needs. If you believe the Conservated         | has limitations in these areas, check the  |
| box. Select as many as apply.                         |  |
| 94  | л<br>п                                     |
| Can't be left alone or will wander                    |  |
| Gets confused easily                                  |  |
| Doesn't understand time or know date                  |  |
| Can't communicate verbally                            |  |
| Can't recognize familiar people                       |  |
| Can't eat without assistance                          |  |
| Can't prepare meals                                   |  |
| Can't bathe without assistance.                       |  |
| Can't dress self/groom alone                          | *  |
| Can't use toilet alone                                |  |
| Can't shop or make change                             |  |
| Can't find place to live or maintain it.              |  |
| Can't use public transportation                       |  |
| Can't take medications or talk to docto               | r without assistance                       |
| Can't perceive or recognize danger                    | 2  |
| Susceptible to sexual abuse or abused                 | I  |
| Abuses prescriptions, drugs, or alcoho                |  |
| None of the above                                     | - N  |
| None of the above                                     | pc   |
| VI. Specific Examples of Why Conservatorship          | is Needed                                  |
| On the separate Attachment, give facts that su        |  |
| Conservatee is unable to provide properly for         |  |
| clothing, and shelter (specify in detail). Provid     |  |
| ordaning, and strenter (specify in detail). Provid    | e specific examples from the proposed      |

Page 3 of 7

Conservatee's daily life showing significant behavior patterns and challenges.

## VII. Requests for Special Powers

Because the law wants to encourage maximum self-reliance for a developmentally disabled adult, an adult caretaker can have no power over important life choices without court approval. This is true even if the adult caretaker is a parent who has been handling these choices for their child's entire life.

The Seven Limited Conservatorship Special Powers that the Court can grant to the Conservator are:

- 1) To fix the residence or specific dwelling of the limited Conservatee
- 2) Access to the confidential records and papers of the limited Conservatee
- 3) Right to consent or withhold consent to the marriage of limited Conservatee
- 4) The right of the limited Conservatee to contract
- 5) Right to give or withhold medical consent
- 6) The limited Conservatee's right to control his/her own social and sexual contacts and relationships
- 7) Right to make decisions concerning education.

Typically, our court does <u>not</u> like to grant powers #3 or #6 to the Conservator. If you feel very strongly about obtaining either of these powers, write an explanation why on a separate attachment. Make one attachment for each power.

The next set of questions will ask you about which of these 7 important powers you want to ask the court to give the adult caretaker ("limited conservator"). Think about the realistic capabilities of your child. If you answer YES, your child will be the only one with the right to make these decisions and the Limited Conservator will have no input. You will also have to explain the reason why you need this power.

| 1. | Should your child have the right to make decisions independently about where to live?  \( \text{Y}  \text{N} \)  If No, is your child is mentally incapable of securing housing and unable to choose an appropriate living situation, contract for housing, or maintain a place to live? \( \text{Q} \text{Y}  \text{N} \) |
|----|--|
|    |  |
| 2. | Should your child have the right to control confidential records and papers so you can't get access to these papers?   Y  N  |
|    | If No, is your child unable or have limited ability to understand the records/papers   |
|    | and the concept of privacy? □ Y □ N  |
|    |  |
| 3. | Should your child have the right to enter into contracts independently? □ Y □ N  |
|    | If No, is your child unable or have no or limited ability to understand and make decisions regarding the terms of any contract or the consequences from entering into a hinding agreement?   |

| 4.      | Should your child have the right to make decisions about education independently? □ Y □ N   |
|---------|---|
|         | If No, does your child have no or limited ability to understand and make decisions regarding his/her own education and development? □ Y □ N   |
| 5.      | Should your child have the right to give or withhold medical consent independently?   |
|         | If No, is your child is not capable of understanding anything related to medical or psychological ailments and treatments, and therefore cannot provide informed consent? □ Y □ N   |
|         | Should your child have the independent right to make social and/or sexual contacts and relationships? <i>The Court usually will not grant this power to you.</i> □ Y □ N  If No, why shouldn't your child have the right to make social choices?  |
|         | Write your own statement about why your child should not have the right to make social choices on a separate page.  |
| ı       | Should Your child have the right to get married or enter into a registered domestic partnership without your consent? The Court usually will not grant this power to you.  If No, why shouldn't your child decide about marriage and/or registered domestic partnership? Write your own statement about why your child should not decide about marriage on a separate page. |
|         | Alternatives to Conservatorships on deciding whether to give someone the legal power over another adult, the Judge  |
|         | its to make sure that there is no better way of handing this for your child.  |
|         | Can your child understand the concept of a "Conservatorship" or understand and sign legal papers, like a "Power of Attorney" or Trust? □ Y □ N  |
| IX. R   | eferral for Investigator's Report   |
| Are the | re any of the following at the Conservatee's location?  |
|         | 1. Firearms □ Y □ N   |
|         | If yes, describe:   |
|         | If yes, describe:   |
|         | 3. Restraining Order □ Y □ N  |
|         | If yes, describe:   |
|         | 4. Other hazards □ Y □ N  |
|         | If yes, describe:   |

| 5. Has there a previous investig   | pation within the last 6 months? □ Y □ N   |
|--|--|
| X. Fee Waiver  Does Conservatee receive MediCal, Foo  If No, does one of Conservatee's Pare  □ Y □ N | d Stamps, or IHSS? □ Y □ N<br>ents receive SSI, IHSS, Food Stamps, or MediCal?                                 |
|  |  |
| XI. Addresses  |  |
| Courts: San Benito County San Benito Superior Court 450 Fourth Street Holllster, CA 95023            | San Andreas Regional Center: San<br>Benito County:<br>6203 San Ignacio Avenue, Suite 200<br>San Jose, CA 95119 |
|  | SAN BENITO COUNTY PUBLIC DEFENDERS OFFICE Fitzgerald, Alvarez, Ciummo 339 7th Street, Suite G                  |

Hollister, CA 95023

## XII. Family Tree Please List the Name of each of Conservatee's Relatives

If deceased, list the Name and <u>Date or Year of Death.</u>
Siblings only need to be listed if they are age 12 or older.

| Grandparent                           | Grandparent   | Grandparent | Grandparent             |
|---------------------------------------|---------------|-------------|-------------------------|
|                                       |               |             |                         |
|                                       | Parent        | Pare        | ent                     |
| *                                     | CON           | ISERVATEE   | V 9                     |
| Spouse or Registered Domestic Partner | Sibling age 1 | 2 or older  | Sibling age 12 or older |
| Sibling age 12                        | or older      | Siblin      | g age 12 or older       |
| Children                              |               |             |                         |

In "Attachment 2," write a letter (or "declaration") to the Court.

- 1. Describe in detail the person's diagnosis, level of functioning, mental and/or physical health. Say why there is a need for a Conservatorship. Be specific about the daily activities he/she needs help with or cannot do without assistance.
- 2. You do <u>not</u> need to list the conservatee's assets or describe how the person cannot manage his/her finances. Financial questions apply to Conservatorship of the Estate and the Self Help Center does not assist with Conservatorship of the Estate.
- 3. Use the attached forms or type your own document. Typing is better. Use regular white paper. The lines do not need to be numbered.

| SHORT TITLE:  - Limited Conservatorship of the Person of:  | CASE NUMBER:  |
|--|---|
| <del>-</del>   |   |
| ATTACHMENT (Num<br>(This Attachment may be used w  |   |
| UNABLE TO PROVIDE FOR PERSONAL NEEDS.  | The following facts support Petitioner's allegations              |
| that the proposed conservatee is unable to provide proclothing, and shelter.   | perly for his/her needs for physical health, food,                |
| cioching, and suction  |   |
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| (If the item that this Attachment concerns is made under penalty of partial Attachment are made under penalty of perjury.) | erjury, all statements in this Page of<br>(Add pages as required) |
| Term Approved for Optional Use   | IMENIT  |

| SHORT TITLE:   | CASE NUMBER:       |    |
|--|--------------------|----|
| Limited Conservatorship of the Person of:  |                    |    |
|  |                    |    |
| ATTACHMENT (Number): 2   | _                  |    |
| (This Attachment may be used with any Judicial                                       | Council form.)     |    |
| CONTINUED  |                    |    |
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| f the item that this Attachment concerns is made under penalty of perjury, all state | ments in this Page | of |
| ttachment are made under penalty of perjury.)  | (Add pages as      |    |

|   |  |   | GC-33       |
|---|--|---|-------------|
| ATTORNEY OR PARTY WITHOUT ATTORNEY                                  | STATE BAR NUMBER:                        | FOR COURT USE ONLY  |             |
| NAME:   |  |   |             |
| FIRM NAME:  |  |   |             |
| STREET ADDRESS:   |  |   |             |
| CITY:   | STATE: ZIP CODE:                         |   |             |
| TELEPHONE NO.:  | FAX NO.:                                 |   |             |
| E-MAIL ADDRESS:   |  |   |             |
| ATTORNEY FOR (name): Pro Per  | SE SAN DENITO                            |   |             |
| SUPERIOR COURT OF CALIFORNIA, COUNTY O                              | F SAN DENITO                             |   |             |
| MAILING ADDRESS: 450 Fourth Street                                  |  |   |             |
| city and zip code: Hollister, CA 95023                              |  |   |             |
| BRANCH NAME: Probate  |  |   |             |
| CONSERVATORSHIP OF THE X PERSO                                      | N FSTATE OF (Name):                      |   |             |
| CONSERVATORSHII OF THE ATTERSO                                      | ESTATE OF (Name).                        |   |             |
| CONSERVA  | ATEE 🔀 PROPOSED CONSI                    | FRVATEF   |             |
|   | <del></del>                              | CASE NUMBER:  |             |
| CAPACITY DECLARATION-   | CONSERVATORSHIP                          | STOL NOMBER.  |             |
| TO PHYSICIAN, P   | SYCHOLOGIST, OR RELIGIOU                 | S HEALING PRACTITIONER  |             |
| The purpose of this form is to enable the court                     |  |   |             |
| ·   | · · · · · · · · · · · · · · · · · · ·    | ould be appointed to care for him or her. The co  | ourt        |
| hearing is set for (date):  |  | e item 5, then sign and file page 1 of this form.)  |             |
| B. X has the capacity to give informed cons                         | sent to medical treatment. <i>(Comp</i>  | olete items 6 through 8, sign page 3, and file pa   | ges 1       |
| through 3 of this form.)  |  |   |             |
| C. has a major neurocognitive disorder (s                           | such as dementia) and, if so, (1)        | whether he or she needs to be placed in a secu  | red-        |
| perimeter residential care facility for th                          | ne elderly, and (2) whether he or :      | she needs or would benefit from medication for  | the         |
| treatment of major neurocognitive disc                              | orders (including dementia). <i>(Con</i> | nplete items 6 and 8 of this form and complete f  | orm ·       |
| GC-335A; sign and attach form GC-33                                 | 35A. File pages 1 through 3 of thi       | s form and file form GC-335A.)  |             |
| (If more than one item is checked above, sign                       |  |   |             |
| File page 1 through the last applicable page of                     |  | le form GC-335A as well.)   |             |
| COMPLETE ITEMS 1-4 OF THIS FORM IN E                                |  |   |             |
|   | GENERAL INFORMATIO                       | N   |             |
| 1. (Name):  |  |   |             |
| 2. (Office address and telephone number):                           |  |   |             |
| 3. I am   | ion Department action wi                 | thin the eagns of my license  |             |
| a. X a California-licensed physic                                   |  | min the scope of my license<br>ajor neurocognitive disorders (including dement                      | 4i_\        |
| <del></del> ;   |  | ajor neurocognitive disorders (including dement<br>er alone for healing. The (proposed) conservated | •           |
|   |  | e ONLY the determination in item 5.)  | 5 15 all    |
| 4. (Proposed) conservatee (name):                                   | Tilly care. (Fractitioner may mak        | e order the determination in term 3.)   |             |
| a. I last saw the (proposed) conservatee or                         | o (date):                                |   |             |
| b. The (proposed) conservatee X is                                  |  | ny continuing treatment and care.   |             |
| ABILITY TO ATTEND COURT HEARING                                     | a patient ander it                       | ry conginality grouping and care.   |             |
| <ol> <li>A court hearing on the petition for appointment</li> </ol> | ent of a conservator is set for the      | date indicated in item A above. (Complete a or  | b.)         |
| a. X The proposed conservatee is able t                             |  |   | /           |
|   | =  | to attend the court hearing (check all items below  | ow.         |
| that apply)   | •  | <b>0</b> (  |             |
| (1) on the date set (see date in bo                                 | x in item A above).                      |   |             |
| (2) for the foreseeable future.                                     | ,  |   |             |
| (3) until (date):   |  |   |             |
| (4) Supporting facts (State facts in the                            | e space below or check this box          | and state the facts in Attachment 5.)   |             |
|   |  |   |             |
|   |  |   |             |
| I declare under penalty of perjury under the laws                   | s of the State of California that the    | e toregoing is true and correct.  |             |
| Date:   | <b>L</b>                                 |   |             |
| (TYPE OR PRINT NAME)  |  | (SIGNATURE OF DECLARANT)  | Page 1 of 3 |

| СО | NSER  | RVATORSI            | HIP OF TH             | E X P  | ERSON [                 | ESTA              | TE OF (      | Name):          |                 | CASE NUMBER:                                    |  |
|----|---|---------------------|-----------------------|--|-------------------------|-------------------|--------------|-----------------|-----------------|---|--|
|    |   |                     | _                     |  |                         |                   |              |                 |                 |   |  |
|    |   |                     |                       | _ cons   | ERVATEE                 | IX PR             | OPOSED       | CONSER          | /ATEE           |   |  |
| E  | VALU  | IATION O            | F (PROPO              | SED) CON   | ISERVATE                | E'S MEN           | TAL FUNC     | CTIONS          |                 |   |  |
|    | <b>Note to practitioner:</b> This form is <b>not</b> a rating scale. It is intended to assist you in recording your <i>impressions</i> of the (proposed) conservatee's mental abilities. Where appropriate, you may refer to scores on standardized rating instruments. |                     |                       |  |                         |                   |              |                 |                 |   |  |
| a  | nstru   | ctions for          | items 6A-             | - <b>6C</b> ): Ched  | ck the anni             | opriate de        | signation :  | as follows:     | <b>a</b> = no a | pparent impairment; <b>b</b> = moderate         |  |
| in | npairn  | nent; <b>c</b> = n  | najor impai           | rment; <b>d</b> =  |                         | -                 | -            |                 |                 | ; <b>e</b> = I have no opinion.                 |  |
| A  | <ul> <li>Alertness and attention</li> <li>(1) Levels of arousal (lethargic, responds only to vigorous and persistent stimulation, stupor)</li> <li>a</li></ul>  |                     |                       |  |                         |                   |              |                 |                 |   |  |
|    | (2) Orientation (types of orientation impaired)   |                     |                       |  |                         |                   |              |                 |                 |   |  |
|    |   | а 🔲                 | b                     | с  | d□                      | е 🔲               | Persor       | 1               |                 |   |  |
|    |   | a 🔲                 | ь <u> </u>            | с  | d 🔲                     | e 🔲               | Time (       | day, date,      | month, se       | eason, year)                                    |  |
|    |   | a 🔲                 | ь <u> </u>            | с  | d 🔲                     | e 🔲               | Place        | address, t      | own, stat       | e)  |  |
|    |   | <u> </u>            | b 🔲                   | с <u> </u>   | d 🔲                     | e 🔲               |              | `<br>on ("Why a |                 |   |  |
|    | (3)   | _                   |                       |  | ate (give de            | etailed ans       |              |                 |                 | pility required to thread a needle)             |  |
|    |   | a                   | b 🔛                   | c  | d L                     | e                 |              |                 |                 |   |  |
| В  | Info  | ormation            | processin             | g. Ability to  | ):                      |                   |              |                 |                 |   |  |
|    | (1)   |                     |                       | to rememb  | er a quest              | ion before        | answering    | j; to recall    | names, r        | elatives, past presidents, and events of the    |  |
|    |   | past 24 h<br>i. Sho | rt-term me            | mory   | а                       | b□                | c 🔲          | d□              | е 🔲             |   |  |
|    |   |                     | g-term mer            | -  | <u> —</u><br>а <u> </u> | b 🔲               | c 🔲          | d 🔲             | e 🗀             |   |  |
|    |   |                     | o -<br>nediate reca   | , and the second | а 🔲                     | b 🔲               | c $\square$  | d 🔲             | e 🗀             |   |  |
|    | (2)   |                     |                       |  |                         | _                 |              | _               |                 | nability to comprehend questions, follow        |  |
|    | (2)   |                     |                       |  |                         | -                 | -            |                 | -               | mability to comprehend questions, follow        |  |
|    | instructions, use words correctly, or name objects; use of nonsense words) a  |                     |                       |  |                         |                   |              |                 |                 |   |  |
|    | (3) Recognize familiar objects and persons (deficits reflected by inability to recognize familiar faces, objects, etc.)  a   b   c   d   e  |                     |                       |  |                         |                   |              |                 |                 |   |  |
|    | (4)   |                     | _                     |  |                         | _                 | ected by in  | nability to p   | erform si       | mple calculations)                              |  |
|    | ( )   | a 🔲                 | b                     | c 🔲  | d 🔲 `                   | е                 | - ,          | -7 - 1          |                 | - /   |  |
|    | (5)   |                     | _                     |  | •                       | s reflected       | by inability | y to grasp      | abstract a      | aspects of his or her situation or to interpret |  |
|    |   | a 🔲                 | expressio<br>b        | ns or prov   | erbs)<br>d 🔲            | е 🔲               |              |                 |                 |   |  |
|    | (6)   |                     |                       | _  | _                       |                   | hvsical abi  | litv) in one    | 's own ra       | tional self-interest (deficits reflected by     |  |
|    | ( )   |                     | to break co           |  |                         |                   |              |                 |                 |   |  |
|    |   | a 🔲                 | ь                     | c 🔲  | d 🔲                     | e 🔲               |              |                 |                 |   |  |
|    | (7)   | Reason<br>a 🗀       | logically<br><b>b</b> | c 🔲  | d□                      | е 🔲               |              |                 |                 |   |  |
| С  | . The   | ought disc          | -                     | •  | -                       | <b>-</b>          |              |                 |                 |   |  |
|    | (1)   | Severely            | _                     | _  |                         |                   | ; nonsensi   | cal, incohe     | erent, or r     | nonlinear thinking)                             |  |
|    | a b c d e (2) Hallucinations (auditory, visual, olfactory)  |                     |                       |  |                         |                   |              |                 |                 |   |  |
|    | (2)   | a 🛄                 | b 🔲                   | c $\Box$   | d 🔲                     | е 🔲               |              |                 |                 |   |  |
|    | (3)   | Delusion            | ns (demons            | _  | e belief ma             | intained w        | ithout or a  | gainst rea      | son or ev       | idence)   |  |
|    | a  b c d e (4) Uncontrollable or intrusive thoughts (unwanted compulsive thoughts, compulsive behavior)   |                     |                       |  |                         |                   |              |                 |                 |   |  |
|    | (4)   | a 🔲                 | b 🔲                   | trusive the  | d 🔲                     | vanted cor<br>e 🔲 | inpuisive th | iougnts, c      | ompuisiVe       | e benavior)                                     |  |
|    |   | ~                   | ~ 🖵                   | <b>-</b>   | ~                       | - <b>-</b>        |              |                 |                 |   |  |

(Continued on next page)

CAPACITY DECLARATION-CONSERVATORSHIP



| CONSERVATORSHIP OF THE X PERSON  ESTATE OF (Name):  | CASE NUMBER:   |     |
|---|--|-----|
| CONSERVATEE X PROPOSED CONSERVATEE  |  |     |
| D. Ability to modulate mood and affect. The (proposed) conservatee has persistent or recurrent emotional state that appears inappropriate in degree to his or has remainder of item 6D.) have no opinion.  (Instructions for item 6D): Check the degree of impairment of each inappropriate modinappropriate; b = moderately inappropriate; c = severely inappropriate.   |  |     |
| Anger a b c Euphoria a b c Anxiety a b c Depression a b c Panic a b c Despair a b c C   | Helplessness a b b Apathy a b Indifference a b   | c   |
| <ul> <li>E. The (proposed) conservatee's periods of impairment from the deficits indicated in item (1)  do NOT vary substantially in frequency, severity, or duration.</li> <li>(2) do vary substantially in frequency, severity, or duration (explain; continue on</li> </ul>  |  |     |
| F. (Optional) Other information regarding my evaluation of the (proposed) conserva symptomatology, and other impressions) is stated below stated i  | tee's mental function (e.g., diagnosis,<br>in Attachment 6F.   | ,   |
| ABILITY TO CONSENT TO MEDICAL TREATMENT  7. Based on the information above, it is my opinion that the (proposed) conservatee  a.  has the capacity to give informed consent to any form of medical treatment. This capacity.  b.  lacks the capacity to give informed consent to any form of medical treatment becarespond knowingly and intelligently regarding medical treatment or (2) unable to means of a rational thought process, or both. The deficits in the mental functions impair the (proposed) conservatee's ability to understand and appreciate the consopinion is limited to medical consent capacity. | ause he or she is <i>either</i> (1) unable to<br>participate in a treatment decision by<br>described in item 6 above significant | tly |
| (Declarant must initial here in the second of pages attached:   | f item 7b applies:   | .)  |
| declare under penalty of perjury under the laws of the State of California that the foregoing is  | s true and correct.  |     |
| Date:   |  |     |
| <b>\</b>  |  |     |
| (TYPE OR PRINT NAME)  | (SIGNATURE OF DECLARANT)   |     |

|                     | CONFIDENTIAL (DO NOT ATTAC   | H TO PETITION)  | GC-314 |
|---------------------|--|---|--------|
| АТТО                | RNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  | FOR COURT USE ONLY  |        |
| E-MAI               | PHONE NO.: FAX NO. (Optional):  L ADDRESS (Optional):  RNEY FOR (Name):  |   |        |
| :                   | ERIOR COURT OF CALIFORNIA, COUNTY OF SAN BENITO  STREET ADDRESS: 450 Fourth Street  MAILING ADDRESS: 450 Fourth Street  ITY AND ZIP CODE: Hollister, CA 95023  BRANCH NAME: Probate  |   |        |
| CON<br>(Nan         | SERVATORSHIP OF<br>ne):<br>PROPOSED CONSERVATEE  | CASE NUMBER:  |        |
| С                   | CONFIDENTIAL CONSERVATOR SCREENING FORM  onservatorship of  Person Estate Limited Conservatorship  | HEARING DATE AND TIME:  | DEPT.: |
|                     | The proposed conservator must complete and sign this form. The perconservator must submit the completed and signed form to the countries form must remain confident  | rt with the conservatorship petition  | n.     |
|                     | How This Form Will Be Used   |   |        |
| sepa<br>the         | form is <b>confidential</b> and will not be a part of the public file in this case. Each prograte copy of this form under rule 7.1050 of the California Rules of Court. The infocourt and by the persons and agencies designated by the court to assist the court cosed conservator as conservator. The proposed conservator <b>must</b> respond to ea | rmation provided in this form will be used in determining whether to appoint the                                      |        |
| 1. a<br>b<br>c<br>e | Date of birth: Social security number: d. Driver's license number:   | State:<br>Other:  |        |
| 2. a<br>b           |  | months.   |        |
| 3. <b>b</b>         | I was I was not nominated as conservator of the person the proposed conservatee. the spouse or registered domestic part a parent of the proposed conservatee (If you checked "I was," provide documents.   | ner of the proposed conservatee   | ,      |
| 4. a<br>b           | dissolution of marriage, annulment, or adjudication of nullity of the marria explain in Attachment 4.)   | - · ·   |        |
| 5. a<br>b           | terminate my domestic partnership with the proposed conservatee. (If you a lam a former domestic partner of the proposed conservatee. My domestic conservatee was terminated on (date): (Ex  | uchecked "I do," explain in Attachment 5.<br>c partnership with the proposed<br>plain circumstances in Attachment 5.) | )      |
| c<br>e o            |  |   |        |
| 6. a<br>b           | (If you checked "I do," explain in Attachment 6.)  | e a financial obligation to me.   |        |

Page 1 of 2



c. 🔲 lam

(If you checked "I am," explain in Attachment 6.)

I am not an agent for a creditor of the proposed conservatee.

| CONSERVATORSHIP OF (Name):   | CASE NUMBER:  |  |  |
|--|---|--|--|
| _  | PROPOSED CONSERVATEE  |  |  |
| 7. I have I have not   | filed for bankruptcy protection within the last 10 years. (If you checked "I have," explain in Attachment 7.)   |  |  |
| 8.    I have    I have not   | been convicted of a felony or had a felony expunged from my record. (If you checked "I have," explain in Attachment 8.)   |  |  |
| 9. I have I have not   | been charged with, arrested for, or convicted of embezzlement, theft, or any other crime involving the taking of property. (If you checked "I have," explain in Attachment 9.)  |  |  |
| 10. I have I have not  | been charged with, arrested for, or convicted of a crime involving fraud, conspiracy, or misrepresentation of information. (If you checked "I have," explain in Attachment 10.)   |  |  |
| 11.  I have I have not   | been charged with, arrested for, or convicted of any form of elder abuse or neglect. (If you checked "I have," explain in Attachment 11.)   |  |  |
| 12. I have I have not  | had a restraining order or protective order filed against me in the last 10 years. (If you checked "I have," explain in Attachment 12.)   |  |  |
| 13.  | required to register as a sex offender under California Penal Code section 290. (If you checked "I am," explain in Attachment 13.)  |  |  |
| 14.  I have I have not   | previously been appointed conservator, executor, or fiduciary in another proceeding. (If you checked "I have," explain in Attachment 14.)   |  |  |
| 15.  I have I have not   | been removed or resigned as a conservator, guardian, executor, or fiduciary in any other case. (If you checked "I have," explain in Attachment 15.)   |  |  |
| 16.  I have or may have  | I do not have an adverse interest that the court may consider to be a risk to, or to have an effect on, my ability to faithfully perform the duties of conservator. (If you checked "I have or may have," explain in Attachment 16.)  |  |  |
| 17. 🔲 I am 🔲 I am not  | a private professional fiduciary, as defined in Business and Professions Code section 6501(f). (If you checked "I am," respond to item 18. If you checked "I am not," go to item 19.)   |  |  |
| 18. I am I am not currently licensed by the Professional Fiduciaries Bureau of the Department of Consumer Affairs. My license status and information is stated in item 1 on page 1 of the Professional Fiduciary Attachment signed by me and attached to the petition that proposes my appointment as conservator in this matter. (Complete and sign the Professional Fiduciary Attachment and attach it to the petition, or deliver it to the petitioner for attachment, before the petition is filed. See item 3c(7) of the petition. Use form GC-210(A-PF)/GC-310(A-PF) for this attachment.) |   |  |  |
| 19. 🔲 I am 🔲 I am not  | a responsible corporate officer authorized to act for (name of corporation):  |  |  |
|  | a California nonprofit charitable corporation that meets the requirements for appointment as conservator of the proposed conservatee under Probate Code section 2104. I certify that the corporation's articles of incorporation specifically authorize it to accept appointments as conservator. (If you checked "I am," explain the circumstances of the corporation's care of, counseling of, or financial assistance to the proposed conservatee in Attachment 19.) |  |  |
| 20. Do you, or does any other personal Yes No  | on living in your home, have a social worker or parole or probation officer assigned to him or her?  (If you checked "Yes," explain in Attachment 20 and provide the name, address, and telephone number of each social worker, parole officer, or probation officer.)  |  |  |
| DECLARATION  |   |  |  |
| I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.  Date:  |   |  |  |
| (TYPE OR PRINT NAME OF PROP  | OSED CONSERVATOR) (SIGNATURE OF PROPOSED CONSERVATOR)*  |  |  |

\*Each proposed conservator must fill out and file a separate screening form.

| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): | FOR COURT USE ONLY |  |
|---|--------------------|--|
|   |                    |  |
|   |                    |  |
|   |                    |  |
| TELEPHONE NO.: FAX NO. (Optional):  |                    |  |
| E-MAIL ADDRESS (Optional):  |                    |  |
| ATTORNEY FOR (Name):  |                    |  |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BENITO                        |                    |  |
| street address: 450 Fourth Street   |                    |  |
| mailing address: 450 Fourth Street  |                    |  |
| CITY AND ZIP CODE: Hollister, CA 95023                                    |                    |  |
| BRANCH NAME: Probate  |                    |  |
| CONSERVATORSHIP OF THE  PERSON  ESTATE OF                                 |                    |  |
| (Name):   |                    |  |
|   | CONSERVATEE        |  |
| DUTIES OF CONSERVATOR   | CASE NUMBER:       |  |
| and Acknowledgment of Receipt of Handbook for Cor                         | servators          |  |

#### **DUTIES OF CONSERVATOR**

When you are appointed by the court as a conservator, you become responsible to the court and assume certain duties and obligations. All of your actions as conservator are subject to review by the court. You should clearly understand the information on this form. You will find additional information in the Judicial Council's *Handbook for Conservators*, receipt of which, in addition to a copy of this form, you are required by law to acknowledge.

#### I. THE CONSERVATEE'S RIGHTS

Conservatees do not lose all rights or all voice in important decisions affecting their lives. All conservatees have the right to be treated with understanding and respect, the right to have their wishes considered, and the right to be well cared for by their conservators. Conservatees generally keep the right to (1) control their own wages or salary from employment, (2) make or change a will, (3) marry, (4) receive personal mail, (5) be represented by a lawyer, (6) ask a judge to change conservators, (7) ask a judge to end the conservatorship, (8) vote, unless a judge decides they are not capable of exercising this right, (9) control personal spending money if a judge has authorized an allowance, and (10) make their own medical decisions, unless a judge has taken away that right and given it exclusively to their conservators.

#### II. CONSULT WITH YOUR ATTORNEY

Your attorney will advise you on your duties, the limits of your authority, the conservatee's rights, your dealings with the court, all other topics discussed in this form, and many other matters. He or she will tell you when you must ask for prior court approval to take an action, when you may do so (and why it might be a good idea), and when prior court approval is not required. All legal questions should be discussed with your attorney, not the court staff, which is not permitted to give legal advice.

Your attorney will also help prepare your inventories, accountings, petitions, and all other documents to be filed with the court; and will see that the persons entitled to be notified of your actions are given proper notice. He or she will also advise you about legal limits on estate investments, leases and sales of estate assets, loans, lawsuits against others involving the conservatee or his or her property, and many other matters, and can prepare or review documents needed in these matters. You should communicate frequently and cooperate fully with your attorney at all times. When in doubt, contact your attorney.

Other questions may be answered by calling on local community resources. (To find these resources, see the *Handbook for Conservators* and the local supplement distributed by the court.)

#### III. CONSERVATOR OF THE PERSON

If the court appoints you as conservator of the person, you are responsible for the conservatee's care and protection. You must decide, within certain limits, where the conservatee will live; and you must arrange for the conservatee's health care, meals, clothing, personal care, housekeeping, transportation, and recreation.

#### A. DETERMINE THE APPROPRIATE LEVEL OF CARE FOR THE CONSERVATEE

You must determine the conservatee's appropriate level of care. Your determination must be in writing, signed under penalty of perjury, must be filed with the court within 60 days of the date of the court's order appointing you as conservator, and must include:

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| CONSERVATORSHIP OF (Name): |             | CASE NUMBER: |
|----------------------------|-------------|--------------|
|                            | CONSERVATEE |              |
|                            |             |              |

III. A. 1. An evaluation of the level of care existing when the petition for your appointment as a conservator was filed and the measures that would be necessary to keep the conservatee in his or her **personal residence**.

(Note: The conservatee's **personal residence** is the residence the conservatee understood or believed to be his or her permanent residence on (1) the date the petition for appointment of a conservator was filed in this matter, or (2) on the last earlier date the conservatee could form or communicate an understanding or belief about a permanent residence, whether or not he or she was living there when the appointment petition was filed. See Cal. Rules of Court, rule 7.1063(b).)

- 2. A plan to return the conservatee to his or her **personal residence** or an explanation of the limitations or restrictions on a return of the conservatee to that residence in the foreseeable future if the conservatee was not living there when the petition for appointment of a conservator was filed.
- 3. A reevaluation after a material (important) change in circumstances affecting the conservatee's needs for placement and care after your initial determination.
- **4.** If the conservatee is a limited conservatee who is developmentally disabled, special rules may apply to the determination of his or her level of care and residential placement. See item **VI** below.

#### **B. DECIDE WHERE THE CONSERVATEE WILL LIVE**

- 1. You must decide where the conservatee will live. You may choose a residence in California without prior approval of the court, but you must choose the least restrictive appropriate residence that is available and necessary to meet the conservatee's needs and that is in his or her best interests.
- 2. You must file a written notice of any change of the conservatee's residence with the court within 30 days of the move, and you must mail copies of the notice to the conservatee's attorney, the conservatee's spouse or registered domestic partner, and the conservatee's relatives who were mailed copies of the petition for your appointment as conservator, unless the court excuses you from the mailing to prevent harm to the conservatee. (There is a court form you must use for this notice and another form you may use to prove that you have mailed it. The forms are the *Post-Move Notice of Change of Residence of Conservatee or Ward* (form GC-080) and the *Attachment to Post-Move Notice*, etc. (form GC-080(MA). These forms refer to a "post-move notice" because the notice may be filed and mailed after the date of the move.)
- 3. The law presumes that the conservatee's **personal residence** (see item **IIIA**) is the conservatee's least restrictive appropriate residence. There must be a reason supported by sufficient evidence to justify a change of residence from the conservatee's personal residence (including a move from a care facility or other temporary placement to a residence that is not the conservatee's personal residence).
- 4. If you want to move the conservatee from his or her **personal residence**, in addition to the post-move notice described in item 2, you must mail a notice of your intent to change the conservatee's residence to the conservatee, the conservatee's attorney, if any, and to each other person or entity entitled to notice of the hearing on the petition for your appointment as conservator; and then you must file with the court proof that the notice was mailed. Unless there is an emergency requiring a shorter period of notice, this notice must be mailed at least 15 days before the date of the proposed move. (There is a court form you must use for this notice and another form you may use to prove that you have mailed it. The forms are the *Pre-Move Notice of Proposed Change of Personal Residence of Conservatee or Ward* (form GC-079) and the *Attachment to Pre-Move Notice*, etc. (form GC-079(MA). These forms refer to a "pre-move notice" because the notice must be mailed before the move.)
- 5. If you want to establish the conservatee's residence outside California, you must petition the court for permission before the move. Notice of the court hearing on this petition, together with a copy of the petition, must be mailed to the conservatee and the other persons and entities that were entitled to notice of the hearing on the petition for your appointment as conservator. There is a court form for this petition, the *Petition to Fix Residence Outside the State of California* (form GC-085). Notice of the hearing and proof of its mailing is given on another court form, the *Notice of Hearing—Guardianship or Conservatorship* (form GC-020).
- 6. You may not place the conservatee involuntarily in a mental health treatment facility unless he or she has been determined to be gravely disabled as the result of a mental disorder or impairment by chronic alcoholism, you have been appointed as conservator under the Lanterman-Petris-Short Act (Welf. & Inst. Code, § 5350 et seq.), and then only if the court has authorized the placement. If the court has authorized you to place the conservatee in a secured-perimeter residential care facility or a locked and secured nursing facility because he or she suffers from dementia, you must be sure that the placement is the least restrictive placement appropriate to the conservatee's needs.



| CONSERVATORSHIP OF (Name): | CASE NUMBER: |
|----------------------------|--------------|
| CONSERVATEE                |              |

#### III. C. PROVIDE MEDICAL CARE FOR THE CONSERVATEE

You are responsible for making sure that the conservatee's health care needs are met. But there are special rules you must follow to meet these needs. Two of the most important rules are as follows:

- 1. Unless the court has given you exclusive authority to consent to the conservatee's medical treatment because the court has determined that the conservatee has lost the capacity to make sound medical decisions, your consent or refusal to consent to such treatment is not sufficient if the conservatee disagrees (except in certain emergency situations). If you do have exclusive medical consent authority, you should be sure that all medical treatment and medications are appropriate.
- 2. If the conservatee has dementia and has lost the capacity to give an informed consent to the administration of medications for its treatment and care, you must be given specific authority by the court to consent to the administration of these medications. If you do have this authority, you should be sure that the medications are appropriate.

#### D. WORK WITH THE PERSON(S) RESPONSIBLE FOR MANAGING THE CONSERVATEE'S PROPERTY

If other persons are handling the conservatee's property, such as his or her estate conservator, the conservatee's spouse or registered domestic partner in possession of the couple's marital or partnership property, or the trustee of a trust created for the management of the conservatee's property and for his or her support, you must work together to be sure that the conservatee can afford the care you arrange. Purchases you make for the conservatee must be approved by the person(s) responsible for managing the conservatee's assets or you may not be reimbursed or your reimbursement may be delayed.

#### IV. CONSERVATOR OF THE ESTATE

The conservatee's property or assets and income are known as the conservatee's "estate." If the court appoints you as conservator of the estate, you will manage the conservatee's finances, protect the conservatee's income and property or assets, make an inventory of the conservatee's property or assets, make sure the conservatee's bills are paid, invest the conservatee's money, see that the conservatee receives all the income and benefits to which he or she is entitled, ensure that the conservatee's tax returns are filed on time and all taxes paid, keep accurate financial records, and regularly report the conservatee's financial condition to the court. (Note: Property or assets and income in a trust for the conservatee's support and maintenance are usually not considered as part of the conservatee's estate, particularly if the trust was created and funded before the appointment of a conservator. Unless the conservatee's spouse or registered domestic partner consents to its inclusion in the conservatee's estate, the community property of the conservatee and his or her spouse or registered domestic partner under the management and control of the spouse or partner is also not part of the conservatee's estate.)

#### A. MANAGING THE ESTATE

#### 1. Prudent management for the benefit of the conservatee; prudent investments

You must manage the estate's property or assets and income for the benefit of the conservatee and with the care of a prudent person dealing with someone else's property. You must not make unreasonably risky investments of money or property of the estate.

#### 2. Prior court approval required for fees, borrowing, loans, and gifts

You must ask and receive the court's permission, after full disclosure of all relevant facts, before you may pay from the conservatee's estate fees to yourself for your services as conservator and to your attorney for his or her services to you; borrow money for or loan money from the conservatee's estate (to yourself or anyone else); or make gifts of estate assets or property.

#### 3. Keep estate money and property separate from your or anyone else's money or property

You must keep the money and property of the conservatee's estate separate from your money or property or from the money or property of any other person. Never deposit estate funds in your personal bank account or otherwise mix them with your or anyone else's funds, even for brief periods. Title to individual stocks, bonds, or other securities; securities broker accounts; mutual funds; and accounts with banks and other financial institutions must show that these assets are property of the conservatorship estate and not your or anyone else's property.

#### 4. Interest-bearing accounts and other investments

Except for a checking account intended for payment of ordinary expenses, estate bank accounts must earn interest. You may deposit estate funds in one or more insured accounts in financial institutions, but you should not put more than the FDIC insurance limit, currently \$250,000, in any single institution. You have authority to make some investments without court approval. Other investments may be made only after court approval has been obtained. Consult with an attorney before making any investments, even those you have authority to make without court approval.



| CONSERVATORSHIP OF (Name): | CASE NUMBER: |
|----------------------------|--------------|
| CONSERVATEE                |              |

#### IV. A. 5. Claims against others on behalf of the conservatee

Pursue claims against others on behalf of the conservatee's estate when it is in the best interests of the conservatee or his or her estate to do so. The court may require you to be represented by a lawyer to proceed with litigation on behalf of the conservatee's estate. Consider requesting prior court authority to pursue or compromise large or complex claims, particularly those that might require litigation and the assistance of legal counsel and those that might result in an award of attorney fees for the other party against the conservatee's estate if you are unsuccessful. You may sign a contingent fee agreement with legal counsel on behalf of the conservatee's estate if such agreements are customary for the type of case involved, but the court must approve the agreement before it is enforceable. You may ask for court approval of a contingent fee agreement before signing it and before legal counsel performs any services under it.

#### 6. Defend against claims against the conservatee's estate

Defend against actions or claims against the conservatee or his or her estate when it is in the best interest of the conservatee or the estate to do so. The court may require you to be represented by a lawyer for your defense of a lawsuit against the conservatee's estate. You may request court approval or instructions concerning the defense or compromise of such a lawsuit.

#### 7. Public and insurance benefits

You must learn about and collect all public and insurance benefits for which the conservatee is eligible.

#### 8. Evaluate the conservatee's ability to manage cash and other assets

You should evaluate the conservatee's ability to manage cash or other assets and take appropriate action, including asking for prior court approval when necessary or appropriate, to enable the conservatee to do so to the level of his or her ability.

#### 9. Locate the conservatee's estate planning documents

You should undertake, as soon as possible after your appointment and qualification as conservator, to locate and take reasonable steps to ensure the safety of the conservatee's estate planning documents, including wills and codicils, living trusts, powers of attorney for health care and finances, life insurance policies, and pension records.

#### 10. Preserve property mentioned in the conservatee's estate planning documents

Make reasonable efforts to identify, locate, and preserve property mentioned in the conservatee's estate planning documents.

#### 11. Guard against inappropriate disclosure of the conservatee's financial information

Subject to your duty of full disclosure to the court and persons entitled under the law to receive it, you must closely guard against unnecessary or inappropriate disclosure of the conservatee's financial information.

#### 12. Conservatee's tangible personal property

If you plan to dispose of any of the conservatee's tangible personal property, inform the conservatee's family members in advance and give them an opportunity to acquire the property, with approval or confirmation of the court.

#### 13. Factors to consider when deciding whether to dispose of any of the conservatee's property

In deciding whether it is in the best interest of the conservatee to dispose of property of his or her estate, consider the following factors, among others, as appropriate in the circumstances:

- (A) The likely benefit or improvement of the conservatee's life that disposing of the property would bring;
- (B) The likelihood that the conservatee would need or benefit from the property in the future;
- (C) The previously expressed or current desires of the conservatee concerning the property, unless accommodating those desires would violate your fiduciary duty to the conservatee or impose an unreasonable expense on the estate;
- (D) The provisions of the conservatee's estate plan concerning the property;
- (E) The tax consequences of disposing of the property;
- (F) The impact of disposition on the conservatee's eligibility for public benefits;
- (G) The condition of the entire estate;
- (H) The likelihood that the property will deteriorate or be subject to waste if kept in the estate; and
- (I) The benefit versus the cost or liability of maintaining the property in the estate.



| CONSERVATORSHIP OF (Name): | CASE NUMBER: |
|----------------------------|--------------|
| CONSERVATEE                |              |

#### IV. A. 14. Property, casualty, and liability insurance

Determine the appropriate kinds and adequate levels of property, casualty, and liability insurance covering the property, assets, risks, and potential liabilities of the conservatee and his or her estate. Maintain the insurance in force during the entire period of the administration (except for assets after they are sold).

#### 15. Communicate with conservator of the person and trustee

You should communicate as necessary and appropriate with the conservator of the conservatee's person, if any, and with the trustee of any trust of which the conservatee is a beneficiary.

#### 16. Other limitations or restrictions

There are many limitations or restrictions on your authority to deal with estate assets not mentioned here. If you do not obtain the court's permission when it is required before taking an action, you may be removed as conservator or you may be required to reimburse the estate from your own personal funds, or both.

#### **B. INVENTORY OF ESTATE PROPERTY**

#### 1. Locate and take possession of the estate's property and prepare an inventory

You must identify, locate, take possession of, and protect all the conservatee's property, assets, and income that will be or become part of the conservatorship estate. You must change the record title or ownership of most property and assets of the estate to reflect the conservatorship. You must record a copy of your *Letters of Conservatorship* (form GC-350) with the county recorder in each county where the conservatee owns real property. You must then prepare an inventory, or a list, of all of the real and personal property of the estate. There are court forms that must be used for the inventory. These consist of a two-page cover sheet, *Inventory and Appraisal* (form DE-160/GC-040) and one or more pages to be attached to the cover sheet containing the list of property, *Inventory and Appraisal Attachment* (form DE-161/GC-041). The property is separated into two categories, cash and cash-equivalent items, listed on Attachment 1; and all other types of real and personal property, listed on Attachment 2.

#### 2. Determine the value of the estate's property

You must arrange to have a **probate referee** appointed by the court appraise, or determine the fair market value of, the noncash property of the estate shown in Attachment 2 of your inventory unless the referee's appointment is waived by the court. You, rather than the referee, may appraise the value of the cash and cash-equivalent items of property listed in Attachment 1, such as bank accounts.

#### 3. File and mail copies of the inventory and appraisal and notice of how to object

Within 90 days after your appointment as conservator, unless the court gives you more time, you must file with the court your inventory containing the appraisals of estate property, signed by you and, if the probate referee has appraised assets, by the referee. You must also mail copies of the completed inventory and appraisal to the conservatee, the conservatee's attorney, if any, and the conservatee's spouse or registered domestic partner, parents, and children, and must give them written notice of how to file an objection to the inventory and appraisal. There is a court form that must be used for this notice, the *Notice of Filing of Inventory and Appraisal and How to Object to the Inventory or the Appraised Value of Property* (form GC-042).

#### C. RECORD KEEPING AND ACCOUNTING

#### 1. Keep records and prepare accountings

You must keep complete and accurate records of each financial transaction affecting the estate, including all receipts of income, changes in assets or property held in the estate, and expenditures. The checkbook for the conservatorship checking account is your indispensable tool for keeping records of income and expenditures. You should also save original bills or invoices paid, records of property sale transactions, receipts for money spent, and bank or other institutions' statements showing income received and money spent. You must prepare periodic accountings of all money and property you have received, what you have spent, the date of each transaction, and its purpose. Your accountings must describe in detail what you have left after you pay the estate's expenses. There are court forms you may, or in some situations must, use for your accountings. You will have to file original statements from banks and other institutions with your accountings.



GC-348 [Rev. January 1, 2011]

| CONSERVATORSHIP OF (Name): |             | CASE NUMBER: |
|----------------------------|-------------|--------------|
| _                          |             |              |
|                            | CONSERVATEE |              |

#### IV. C. 2. Court review of your accountings and records

You must file with the court a report with each of your accountings that shows the current circumstances of the conservatee and the estate, along with a petition requesting that the court review and approve the accounting. Your first accounting is due one year after your appointment, and later accountings must be filed at least every two years after that. The court may order you to file more frequent accountings. You must save your receipts and other original records because the court may ask to review them. If you do not file your accountings as required, the court will order you to do so. You may be removed as conservator if you fail to properly prepare and file your accountings or comply with the court's orders.

#### V. DUTY TO DISCLOSE CHANGES IN MARITAL OR DOMESTIC PARTNERSHIP STATUS

If you are the spouse of the conservatee, you must disclose to the court, and give notice to interested persons under the Probate Code, of the filing of any action or proceeding against the conservatee for (1) legal separation, (2) dissolution of marriage, or (3) adjudication of nullity of the marriage. If you are or were the registered domestic partner of the conservatee, you must disclose to the court any termination of the domestic partnership. The disclosure must be made within 10 days of the initial filing of the action or proceeding or termination of the partnership by filing a notice with the court. If you are not the spouse or registered domestic partner or former partner of the conservatee and one of these events occurs, the conservatee's spouse or former registered domestic partner must disclose the event to you within the same 10-day period.

#### VI. LIMITED CONSERVATOR (for the developmentally disabled only)

#### A. AUTHORITY SPECIFIED IN YOUR LETTERS OF CONSERVATORSHIP AND APPOINTMENT ORDER

If the court appoints you as limited conservator, you will have authority to take care of **only** those aspects of the conservatee's life and financial affairs specified in your *Letters of Conservatorship* and the court's order appointing you. The conservatee retains all other legal and civil rights. Although most of the information provided in this form also applies to limited conservatorships (especially the duties of the conservator of the person), you should clarify with your attorney exactly which information applies in your case.

#### B. DUTY TO HELP LIMITED CONSERVATEE DEVELOP SELF-RELIANCE

You must secure treatment, services, and opportunities that will assist the limited conservatee to develop maximum self-reliance and independence. This assistance may include training, education, medical and psychological services, social opportunities, vocational opportunities, and other appropriate help.

#### C. DETERMINATION OF LEVEL OF CARE FOR CERTAIN LIMITED CONSERVATEES

The level of care determination described in item IIIA does not apply to a limited conservatee who receives services from a regional center for the developmentally disabled and for whom the Director of Developmental Services or the regional center is acting as conservator. Determination of the services provided for and residential placement of these limited conservatees are to be identified, delivered, and evaluated consistent with the individual program plan process described in Welfare and Institutions Code sections 4640–4659. (See Prob. Code, § 2352.5(e).)

#### VII. TEMPORARY CONSERVATOR

If the court appoints you as temporary conservator, you will generally have the same duties and authority as general conservators, **except** the conservatorship will end on the date specified in your *Letters of Temporary Conservatorship*. Most of the information in this form also applies to temporary conservatorships, but you must consult your attorney about which duties you will **not** perform because of the short duration of the temporary conservatorship appointment. A temporary conservator should avoid making long-term decisions or changes that could safely wait until a general conservator is appointed. As temporary conservator, you may not move a conservatee from his or her home, unless there is an emergency, or sell or give away the conservatee's home or any other assets without prior court approval.

### Sign the Acknowledgment of Receipt on page 7.



GC-348 [Rev. January 1, 2011]

|                            | 0001         |
|----------------------------|--------------|
| CONSERVATORSHIP OF (Name): | CASE NUMBER: |
|                            |              |
| CONSERVATEE                |              |

#### VIII. JUDICIAL COUNCIL FORMS

This form identifies a number of Judicial Council forms used for court filings in conservatorship proceedings. This form, the petition for your appointment as conservator, and the order that appoints you as conservator are examples of Judicial Council forms. Judicial Council forms are either mandatory or optional. If a mandatory form applies to a situation or proposed action, it must be used. Optional forms may be used, at the option of the person preparing and filing the form or, in some situations, at the option of the court. Each form is identified on the bottom left side of its first page as optional or mandatory. Judicial Council forms are not available for every situation where a document may or must be filed with the court, but the forms address the most common and important matters that occur during a conservatorship. The *Handbook for Conservators* has additional information about Judicial Council conservatorship forms.

Your attorney will select and prepare the appropriate Judicial Council forms. However, if you do not have an attorney, you can prepare them yourself. All Judicial Council forms are posted on the California courts' public website, www.courts.ca.gov. Select "Forms" at the top of the site's home page, then select the form group in the drop-down menu in the middle of the page. All conservatorship forms are collected in the Probate—Guardianships and Conservatorships form group. They are designated with the prefix "GC," followed by a three-digit number. Forms shown in the drop-down list with an asterisk are mandatory forms.

The forms are posted on the website in both unfillable and fillable versions, as PDF files. The unfillable versions are designed to be completed by typewriter or, in some cases, by hand. Fillable forms may be filled out online, then printed out ready for signing and filing with the court, and they may also be saved to your computer and completed in more than one sitting. Go to the "Forms and Information" page at the Web site's Self-Help Center for more information on accessing the forms.

# ACKNOWLEDGMENT OF RECEIPT of *Duties of Conservator* and *Handbook for Conservators* (Probate Code, § 1834)

I acknowledge that I have received this statement of the duties and liabilities of the office of conservator, the *Duties of Conservator* (form GC-348), and the *Handbook for Conservators* adopted by the Judicial Council.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

| Date. |                      |   |                                       |  |
|-------|----------------------|---|---------------------------------------|--|
|       |                      | • |                                       |  |
|       | (TYPE OR PRINT NAME) |   | (SIGNATURE OF (PROPOSED) CONSERVATOR) |  |
| Date: |                      |   |                                       |  |
|       |                      |   |                                       |  |
|       |                      |   |                                       |  |
|       | (TYPE OR PRINT NAME) |   | (SIGNATURE OF (PROPOSED) CONSERVATOR) |  |
| Date: |                      |   |                                       |  |
|       |                      |   |                                       |  |
|       |                      |   |                                       |  |
|       | (TYPE OR PRINT NAME) |   | (SIGNATURE OF (PROPOSED) CONSERVATOR) |  |

#### **NOTICE**

This statement of duties and liabilities is a summary and is not a complete statement of the law. Your conduct as a conservator is governed by the law itself and not by this summary or by the Judicial Council's *Handbook for Conservators*. When in doubt, consult your attorney.

Data

| 1                    | Name:   | _  |
|----------------------|---|--|
| 2                    | Address:  | _  |
| 3                    |   |  |
| 4                    | Diagram (   |  |
| 5                    | Phone: ()   | _  |
| 6                    | In Pro Per  |  |
| 7                    | CLIDEDIOD COLUDT OF TH                              |  |
| 8                    |   | IE STATE OF CALIFORNIA   |
| 9                    | FOR THE COUNT                                       | Y OF SAN BENITO  |
| 10                   |   | CASE NO. PR  |
| 11                   |   | CASE NO. PR  |
| 12<br>13<br>14       | Limited Conservatorship of the Person of            | CONSENT TO ACT AS CONSERVATOR OF THE PERSON OF PROPOSED CONSERVATEE AND WAIVER OF NOTICE |
| 15<br>16<br>17<br>18 | a Proposed Conservatee                              | Hearing Date: Hearing Time: 1:30 pm Hearing Dept: Room 1                                 |
| 19                   | Ī   | , hereby consent to act as conservator of the  |
| 20                   | person of Proposed Conservatee                      |  |
| 21                   | 3-  |  |
| 22                   | I am entitled to notice in this proceeding, but I w | arve notice of the hearing of the petition. I warve                                      |
| 23                   | timely receipt of the petition.                     |  |
| 24                   |   |  |
| 25                   | Respectfully submitted:                             |  |
| 26                   | Signature   |  |
| 27                   | -   |  |
| 28                   | Date:   |  |
| - 11                 |   |  |

| 1        | Name:                                    |   |
|----------|--|---|
| 2        | Address:                                 | _   |
| 3        | ,  |   |
| 4        |  |   |
| 5        | Phone: ()                                | -   |
| 6        | In Pro Per                               |   |
| 7        | STIDEDTOD COLIDA OF AN                   | IE STATE OF CALIFORNIA  |
| 8        |  |   |
| 9        | FOR THE COUNT                            | Y OF SAN BENITO   |
| 10       |  | CASE NO. PR   |
| 11       |  | CASE NO. PR   |
| 12<br>13 | Limited Conservatorship of the Person of | CONSENT TO ACT AS<br>CONSERVATOR OF THE PERSON<br>OF PROPOSED CONSERVATEE |
| 14       |  | AND WAIVER OF NOTICE  |
| 15       |  | <del></del>   |
| 16<br>17 | a Proposed Conservatee                   | Hearing Date: Hearing Time: 1:30 pm Hearing Dept: Room 1                  |
| 18       |  | Hearing Dept. Room 1  |
| 19       | I,                                       | , hereby consent to act as conservator of the                             |
| 20       | person of Proposed Conservatee           |   |
| 21       |  | vaive notice of the hearing of the petition. I waive                      |
| 22       | timely receipt of the petition.          |   |
| 23       |  |   |
| 24       | Respectfully submitted:                  |   |
| 25       | Respectivity submitted.                  |   |
| 26       | Signature                                |   |
| 27       | Dotos                                    |   |
| 28       | Date:                                    |   |
|          |  |   |

|           | NEY OR PARTY WITHOUT ATTORNEY (name, address, and State Bar number):   |                                       |                  |                                       |  |
|-----------|--|---------------------------------------|------------------|---------------------------------------|--|
| Alterrect | cording return to:   |                                       |                  |                                       |  |
|           |  |                                       |                  |                                       |  |
|           |  |                                       |                  |                                       |  |
| TEL NO.:  | :: FAX NO. (optional):   |                                       |                  |                                       |  |
|           | ADDRESS (optional):  |                                       |                  |                                       |  |
|           | NEY FOR (name):  |                                       |                  |                                       |  |
|           | ior court of california, county of San Benito  |                                       |                  |                                       |  |
|           | TADDRESS: 450 Fourth Street  |                                       |                  |                                       |  |
|           | g ADDRESS: 450 Fourth Street ND ZIP CODE: Hollister, CA 95023  |                                       |                  |                                       |  |
|           | ch name: Probate   |                                       | EOR RECO         | DRDER'S USE ONLY                      |  |
|           | SERVATORSHIP OF (name):  | FOR RECORDER'S USE ONLY  CASE NUMBER: |                  |                                       |  |
|           | , ,  |                                       |                  |                                       |  |
|           |  | CONSERVATEE                           |                  |                                       |  |
|           | LETTERS OF CONSERVATOR   | SHIP                                  |                  | FOR COURT USE ONLY                    |  |
|           | 🔀 Person 🔲 Estate 🔀 Limited  | l Conservatorship                     |                  |                                       |  |
| 1 X       | (Name):  | is the appointed                      |                  |                                       |  |
|           |  | X person estate                       |                  |                                       |  |
|           | of (name):   |                                       |                  |                                       |  |
| 2.        | (For conservatorship that was on December 31, 1980, a  | guardianship of an adult              | orof             |                                       |  |
|           | the person of a married minor) (Name):   |                                       |                  |                                       |  |
|           |  | estate by order dated                 |                  |                                       |  |
|           | (specify): and is now the co   | onservator of the L pe                | rson             |                                       |  |
| 3. X      |  | as follows:                           |                  |                                       |  |
| a         | Exclusive authority to give consent for and to requ  |                                       | eive             |                                       |  |
|           | medical treatment that the conservator in good fa  |                                       |                  |                                       |  |
|           | determines to be necessary even if the conservat   | ee objects, subject to the l          | imitations       |                                       |  |
|           | stated in Probate Code section 2356.   |                                       |                  |                                       |  |
|           | (1) This treatment shall be performed by ar  | · · · · · · · · · · · · · · · · · · · | _                | · · · · · · · · · · · · · · · · · · · |  |
|           | for reliance on prayer alone for healing the conservatorship.  | or which the conservatee              | was an adnerer   | it prior to the establishment of      |  |
|           | (2) (If court order limits duration) This medi   | cal authority terminates or           | n (date):        |                                       |  |
| b.        |  |                                       |                  |                                       |  |
| C.        | Authority to authorize the administration of medications appropriate for the care and treatment of dementia described in |                                       |                  |                                       |  |
|           | Probate Code section 2356.5(c).  |                                       |                  |                                       |  |
| d.        | Powers to be exercised independently under Prob  | oate Code section 2590 ar             | e specified in A | ttachment 3d <i>(specify powers,</i>  |  |
| •         | restrictions, conditions, and limitations).  | norty under Probate Code              | soction 2402 d   | ero an acified in Attachment 2a       |  |
| e.<br>f.  | Conditions relating to the care and custody of pro Conditions relating to the care, treatment, educati                   | · · · · · · · ·                       |                  | •                                     |  |
| 1.        | are specified in Attachment 3f.  | on, and wenale of the con             | scrvatec ander   | Trobate Gode Section 2000             |  |
| g.        | (For limited conservatorship only) Powers of the li  | mited conservator of the p            | erson under Pr   | obate Code section 2351.5 are         |  |
| -         | specified in Attachment 3g.  | '                                     |                  |                                       |  |
| h.        | (For limited conservatorship only) Powers of the li  | mited conservator of the e            | state under Pro  | obate Code section 1830(b) are        |  |
|           | specified in Attachment 3h.  | igi ji kasa sa z = -                  |                  |                                       |  |
| i.        | Other powers granted or conditions imposed are s   | ·                                     |                  | r any other property with sut -       |  |
| (SEAL)    | 4. The conservator is <b>not</b> a specific court order.   | authorized to take possess            | sion of money o  | r any other property without a        |  |
|           | 5. Number of pages attached:   | 1                                     |                  |                                       |  |
|           | WITNESS, clerk of the court, with  |                                       |                  |                                       |  |
|           | Date:  |                                       |                  |                                       |  |
|           |  |                                       |                  |                                       |  |
|           | Clerk, by  |                                       |                  | , Deputy Page 1 of 2                  |  |

| CONSERVATORSHIP OF (name): | CASE NUMBER: |
|----------------------------|--------------|
|                            |              |
|                            |              |
| C                          | CONSERVATEE  |

#### NOTICE TO INSTITUTIONS AND FINANCIAL INSTITUTIONS

(Probate Code sections 2890-2893)

When these *Letters of Conservatorship* (Letters) are delivered to you as an employee or other representative of an *institution* or *financial institution* (described below) in order for the conservator of the estate (1) to take possession or control of an asset of the conservatee named above held by your institution (including changing title, withdrawing all or any portion of the asset, or transferring all or any portion of the asset) or (2) to open or change the name of an account or a safe-deposit box in your financial institution to reflect the conservatorship, you must fill out Judicial Council form GC-050 (for an institution) or form GC-051 (for a financial institution). An officer authorized by your institution or financial institution must date and sign the form, and you must file the completed form with the court.

There is no filing fee for filing the form. You may either arrange for personal delivery of the form or mail it to the court for filing at the address given for the court on page 1 of these Letters.

The conservator should deliver a blank copy of the appropriate form to you with these Letters, but it is your institution's or financial institution's responsibility to complete the correct form, have an authorized officer sign it, and file the completed form with the court. If the correct form is not delivered with these Letters or is unavailable for any other reason, blank copies of the forms may be obtained from the court. The forms may also be accessed from the judicial branch's public Web site free of charge. The Internet address (URL) is <a href="https://www.courts.ca.gov/forms/">www.courts.ca.gov/forms/</a>. Select the form group <a href="https://www.courts.ca.gov/forms/">Probate—Guardianships and Conservatorships</a> and scroll down to form GC-050 for an institution or form GC-051 for a financial institution. The forms may be printed out as blank forms and filled in by typewriter or may be filled out online and printed out ready for signature and filing.

An *institution* under California Probate Code section 2890(c) is an insurance company, agent, or broker; an investment company; an investment bank; a securities broker-dealer; an investment advisor; a financial planner; a financial advisor; or any other person who takes, holds, or controls an asset subject to a conservatorship or guardianship other than a financial institution. Institutions must file a *Notice of Taking Possession or Control of an Asset of Minor or Conservatee* (form GC-050) for an asset of the conservatee held by the institution. A single form may be filed for all affected assets held by the institution.

A financial institution under California Probate Code section 2892(b) is a bank, a trust, a savings and loan association, a savings bank, an industrial bank, or a credit union. Financial institutions must file a Notice of Opening or Changing a Guardianship or Conservatorship Account or Safe-Deposit Box (form GC-051) for an account or a safe-deposit box held by the financial institution. A single form may be filed for all affected accounts or safe-deposit boxes held by the financial institution.

| LETTERS OF CO   | ONSERVATORSHIP           |                        |  |  |  |  |  |  |
|---|--------------------------|------------------------|--|--|--|--|--|--|
| AFFIRMATION   |                          |                        |  |  |  |  |  |  |
| I solemnly affirm that I will perform according to law the duties of  | conservator              | X limited conservator. |  |  |  |  |  |  |
| Executed on (date):   | , at (place):            |                        |  |  |  |  |  |  |
|   | •                        |                        |  |  |  |  |  |  |
| (TYPE OR PRINT NAME)  | (SIGNATURE OF APPOINTEE) |                        |  |  |  |  |  |  |
| CERTIF  | ICATION                  |                        |  |  |  |  |  |  |
| I certify that this document, including any attachments, is a correct the person appointed above have not been revoked, annulled, or se (SEAL)  Date: |                          |                        |  |  |  |  |  |  |
| Clark by  |                          | Denuty                 |  |  |  |  |  |  |

GC-350 [Rev. July 1, 2015]