

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY:		STATE BAR NUMBER	Reserved for Clerk's Lodged Stamp
ATTORNEY FOR (Name):			Reserved for Clerk's Filed Stamp
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES			
COURTHOUSE ADDRESS:			
In the Matter of:			
FINANCIAL DOCUMENTS COVER SHEET (Private Professional Conservators/Guardians/Trustees)			
This form is required to be used for Financial Documents submitted in compliance with Probate Code § 2620(c). Documents are to be loosely bound and not stapled (i.e., 3-ring binder or clip) and must be accompanied by a self-addressed postage-prepaid envelope, or written instructions and authorization for pick-up by the conservator/guardian or his/her designee. Hearing Date: _____ Time: _____ Department: _____			CASE NUMBER:

Name, Address and Telephone number of the Private Professional Conservator/Guardian/Trustee:

Number of pages, including this cover sheet, being submitted: _____

I declare under penalty of perjury that the documents lodged with this caption sheet are the originals.

Date: _____

Private Professional Conservator/Guardian/Trustee

The documents are returned this date by: ☐ mail, or ☐ pick-up, per instructions.

DAVID W. SLAYTON, Executive Officer/Clerk of Court

Date: _____

By: _____
Deputy Clerk

FINANCIAL DOCUMENTS COVER SHEET