

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 LOS ANGELES 111 N. Hill St., Room 429 Los Angeles, CA 90012 Stanley Mosk Courthouse	
CONSERVATORSHIP/GUARDIANSHIP OF:	
Request for Probate Hearing in a District Court: Conservatorship/Guardianship	
CASE NUMBER: _____	

PLEASE NOTE THAT THIS DOES NOT APPLY TO TEMPORARY CONSERVATORSHIPS AND GUARDIANSHIPS, WHICH CAN ONLY BE SCHEDULED IN THE CENTRAL DISTRICT OR THE MICHAEL D. ANTONOVICH COURTHOUSE. This form must be filed with any petition or objection filed by a conservatee if a hearing is being requested in one of the districts listed below:

NOTE: All supporting documents must be submitted at the Court where the initial case was filed.

1. A hearing in the following district:

- | | |
|--|--|
| ☐ East (Pomona Courthouse) | ☐ Southwest (Torrance Courthouse) |
| ☐ Northeast (Pasadena Courthouse) | ☐ Southeast (Norwalk Courthouse) |
| ☐ Northwest (Van Nuys Courthouse) | ☐ West (Santa Monica Courthouse) |
| ☐ South (Long Beach Courthouse) | |

2. The petitioner or conservatee/ward resides in the district in which the hearing is requested:

Petitioner: _____

Address: _____
 (Street Address)

 (City and zip code)

Conservatee/Ward: _____

Address: _____
 (Street Address)

 (City and zip code)

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 YOUR NAME)

 (SIGN YOUR NAME)