

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar Number and Address)</i>  TELEPHONE NO.: _____ FAX NO. <i>(Optional)</i> : _____ E-MAIL ADDRESS <i>(Optional)</i> : _____ ATTORNEY FOR <i>(Name)</i> : _____		<i>For Court Use Only</i>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF MENDOCINO</b>		
<input type="checkbox"/> UKIAH Courthouse 100 North State Street Ukiah, CA 95482	<input type="checkbox"/> TEN MILE Branch Court 700 South Franklin Street Fort Bragg, CA 95437	
Conservatorship of:   PETITIONER:		Case Number:
<b>PETITION FOR TERMINATION OF CONSERVATORSHIP</b>  <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE <input type="checkbox"/> LIMITED CONSERVATORSHIP		HEARING DATE:  HEARING TIME:  DEPARTMENT:

Petitioner, \_\_\_\_\_, respectfully represents and alleges:

1. Petitioner is:
 

☐ The Conservator of the ☐ Person ☐ Estate  
☐ Limited Conservatorship of \_\_\_\_\_ ☐ The Conservatee.  
☐ An interested party *(explain)*: \_\_\_\_\_
2. At the hearing on *(date)* \_\_\_\_\_, *(Conservator's name)* \_\_\_\_\_  
 was appointed Conservator of *(Conservatee's name)* \_\_\_\_\_  
 and *Letters of Conservatorship* were issued on *(date)* \_\_\_\_\_.
3. At the time of the appointment a conservatorship was necessary for the following reason(s):  
 \_\_\_\_\_
4. The best interests of the conservatee require termination of the conservatorship for the following reason(s): \_\_\_\_\_
5. The Conservator ☐ has ☐ has not taken possession or control of assets of the Conservatee.
6. ***[For Conservators of the Estate]*** The total assets of the Conservatee's Estate were \$ \_\_\_\_\_  
 on *(date of appointment)* \_\_\_\_\_ and \$ \_\_\_\_\_ on *(current date or date of last month's bank statement)* \_\_\_\_\_. Conservatee's monthly income consists of \$ \_\_\_\_\_ in public benefits (e.g. Social Security) and \$ \_\_\_\_\_ of other income.
7. The names, addresses, and relationships of the Conservatee's relatives within the second degree as known to the Petitioner are listed ☐ as follows ☐ as attached: \_\_\_\_\_

8. *A Request for Special Notice:*  
☐ has NOT been filed.  
☐ HAS been filed by: \_\_\_\_\_.
9. Conservatorship of the Estate ☐ does ☐ does not include money or property acquired in whole or in part from money received from the Veteran's Administration. *(Note: If the estate does consist of money or property received from the Veteran's Administration, the Veteran's Administration must receive copies of the termination petition, supporting documents, and orders.)*
10. The Conservatee ☐ has ☐ has not been a patient in or on leave from a state hospital under the jurisdiction of the State Department of Mental Health or the State Department of Developmental Services during the conservatorship proceeding. *(Note: If the Conservatee has been a patient in or on leave from such a State Hospital, the director of the appropriate State Department in Sacramento must receive copies of the termination petition, supporting documents, and orders.)*

**WHEREFORE**, Petitioner requests:

The Conservatorship of the ☐ PERSON ☐ ESTATE ☐ LIMITED CONSERVATORSHIP of \_\_\_\_\_  
be terminated.

- ☐ The Conservator remain appointed by the Court for the ☐ Person ☐ Estate.  
☐ The Conservator of the ☐ Person ☐ Estate ☐ Limited Conservatorship for the Conservatee be discharged and the surety of his/her bond, if any, be discharged.  
☐ Other: \_\_\_\_\_.

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

Dated: \_\_\_\_\_

\_\_\_\_\_  
(PRINT NAME)

\_\_\_\_\_  
(SIGNATURE OF PETITIONER)