ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar Number and Address)* TELEPHONE NO.: FAX NO. *(Optional)*: E-MAIL ADDRESS *(Optional)*: ATTORNEY FOR *(Name)*:		*For Court Use Only*
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MENDOCINO		
☐ UKIAH Courthouse 100 North State Street Ukiah, CA 95482	☐ TEN MILE Branch Court 700 South Franklin Street Fort Bragg, CA	
Conservatorship of: PETIONER:		
PETITION TO REMOVE CONSERVATOR ☐ PERSON ☐ ESTATE ☐ LIMITED CONSERVATORSHIP		Case Number:

I *(my name)*, _____, declare:

I am: ☐ the Conservator of the ☐ Person ☐ Estate ☐ Limited Conservatorship of _____
☐ Other: _____

I am petitioning the Court to remove *(name)* _____ as Conservator for the above entitled Conservatee for the following reasons:_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

☐ *Check here if you need more space. Attach a separate piece of paper and write* "Petition to Remove Conservator – Additional Information" *for the title.*

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

_____	_____	_____
Today's Date	*Print Name*	*Petitioner's Signature*