

CONFIDENTIAL (DO NOT ATTACH TO PETITION)

GC-312

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 _____ STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	SUPERIOR COURT OF CALIFORNIA COUNTY OF ALAMEDA BERKELEY COURTHOUSE 2120 MARTIN LUTHER KING JR. WAY BERKELEY, CA 94704
CONSERVATORSHIP OF (Name): _____ <div style="text-align: right;">PROPOSED CONSERVATEE</div>	CASE NUMBER: _____
CONFIDENTIAL SUPPLEMENTAL INFORMATION (Probate Conservatorship)	
Conservatorship of <input type="checkbox"/> Person <input type="checkbox"/> Estate <input type="checkbox"/> Limited Conservatorship	
1. a. Proposed conservatee (name): b. Date of birth: c. Social security No.:	HEARING DATE: _____ DEPT.: _____ TIME: _____

2. ☐ UNABLE TO PROVIDE FOR PERSONAL NEEDS* The following facts support petitioner's allegation that the proposed conservatee is unable to provide properly for his or her needs for physical health, food, clothing, and shelter (*specify in detail, enlarging upon the reasons stated in the petition; provide specific examples from the proposed conservatee's daily life showing significant behavior patterns*): ☐ Specified in Attachment 2.

* If this item is not applicable, complete item 8.

(Continued on reverse)

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CONSERVATORSHIP OF (Name):	CASE NUMBER:
PROPOSED CONSERVATEE	

4. c. (continued)

- (2) ☐ **not living** in his or her residence and
- (a) ☐ will return by (date): (specify supporting facts below in item 4c(3)).
- (b) ☐ will not return to live there (specify supporting facts below in item 4c(3)).
- (c) ☐ other (specify and give supporting facts below in item 4c(3)).
- (3) ☐ Supporting facts (specify if required): ☐ Specified in Attachment 4c.

5. ALTERNATIVES TO CONSERVATORSHIP* Petitioner has considered the following alternatives to conservatorship and found them to be unsuitable or unavailable to the proposed conservatee (specify the alternatives considered and the reason or reasons each is unsuitable or unavailable): ☐ Reasons specified in Attachment 5.

a. Voluntary acceptance of informal or formal assistance (give reason this is unsuitable or unavailable):

b. Special or limited power of attorney (give reason this is unsuitable or unavailable):

c. General power of attorney (give reason this is unsuitable or unavailable):

d. Durable power of attorney for ☐ health care ☐ estate management (give reason this is unsuitable or unavailable):

e. Trust (give reason this is unsuitable or unavailable):

f. Other alternatives considered (specify and give reason each is unsuitable or unavailable):

6. SERVICES PROVIDED* (complete a or b, or both a and b)

- a. ☐ During the year before this petition was filed,
- (1) **health services** ☐ were provided ☐ were not provided to the proposed conservatee (explain):
- ☐ Explained in Attachment 6a(1).

- (2) **social services** ☐ were provided ☐ were not provided to the proposed conservatee (explain):
- ☐ Explained in Attachment 6a(2).

* If this item is not applicable, complete item 8.

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CONSERVATORSHIP OF (Name):	CASE NUMBER:
PROPOSED CONSERVATEE	

6. a. (continued)

- (3) **estate management assistance** ☐ was provided ☐ was not provided to the proposed conservatee (*explain*):
☐ Explained in Attachment 6a(3).

- b. ☐ Petitioner has **no knowledge** of what ☐ social services ☐ health services ☐ estate management assistance was provided to the proposed conservatee during the year before this petition was filed. Petitioner has no reasonable means of determining what services were provided.

7. SUPPORTING FACTS (AFFIDAVITS) The information provided above is stated

- a. Item 1: ☐ on petitioner's own knowledge ☐ in an affidavit (declaration) by another person attached as Attachment 1a.
b. Item 2: ☐ on petitioner's own knowledge ☐ in an affidavit (declaration) by another person attached as Attachment 2a.
c. Item 3: ☐ on petitioner's own knowledge ☐ in an affidavit (declaration) by another person attached as Attachment 3a.
d. Item 4: ☐ on petitioner's own knowledge ☐ in an affidavit (declaration) by another person attached as Attachment 4a.
e. Item 5: ☐ on petitioner's own knowledge ☐ in an affidavit (declaration) by another person attached as Attachment 5a.
f. Item 6: ☐ on petitioner's own knowledge ☐ in an affidavit (declaration) by another person attached as Attachment 6a.

8. ITEMS NOT APPLICABLE The following items on this form were not applicable to the proposed conservatee:

- ☐ 2 ☐ 3 ☐ 4b ☐ 4c ☐ 5 ☐ 6 (*specify reasons each item is not applicable*):
☐ Reasons specified in Attachment 8.

9. Number of pages attached: _____

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)		(SIGNATURE OF PETITIONER)