

ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: FIRM NAME: STREET ADDRESS: CITY: TELEPHONE NO.: EMAIL ADDRESS: ATTORNEY FOR (name):	STATE BAR NUMBER: STATE: ZIP CODE: FAX NO.:	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
MATTER OF (name):		
<input type="checkbox"/> DECEASED <input type="checkbox"/> CONSERVATEE <input type="checkbox"/> WARD <input type="checkbox"/> TRUST		CASE NUMBER:
REQUEST FOR SPECIAL NOTICE		

1. a. I am a person interested in this proceeding.
 b. I am the attorney for a person interested in this proceeding (*specify name of interested person*):
 2. **I request special notice** of the following matters (*check each applicable box*):
 - a. All matters for which special notice may be requested (*Do not check boxes (b)–(i)*.)
 - b. Inventories and appraisals of property, including supplements
 - c. Accountings
 - d. Reports of the status of administration
 - e. Objections to an appraisal
 - f. Petitions for the sale of property
 - g. Spousal or Domestic Partner Property Petition (form DE-221) (Prob. Code, § 13650)
 - h. Other petitions:
 - (1) All petitions
 - (2) The following petitions (*specify*):
 - i. Other matters (*specify*):
3. **Deliver notice** electronically (recipient has filed and served form EFS-005-CV in this case) by mail to
 - a. the interested person at the following address (*specify*):
 - b. the attorney at the following address (*specify*):

Date:



(TYPE OR PRINT NAME)

(SIGNATURE)

Attorney for person requesting special notice
(*client's name*):

MATTER OF <i>(name)</i> :	CASE NUMBER:
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NOTE: You must have your request delivered to the personal representative, conservator, guardian, or trustee, or to that person's attorney. A proof of delivery must accompany this *Request for Special Notice* when it is filed with the court. This page provides a proof of delivery by mail. To show personal delivery, you may use *Proof of Personal Service—Civil* (form POS-020). To show electronic delivery, you may use *Proof of Electronic Service* (form POS-050).

PROOF OF DELIVERY BY MAIL

I declare under the 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 DECLARANT)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

List of names and addresses continued in attachment.