CONFIDENTIAL (DO NOT ATTACH TO PETITION)

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ATT	FORNE	Y OR PARTY WITHOUT ATTORNEY	STATE BAR NUM	BER:			FOR COURT USE ONLY		
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		Y FOR (name):							
1		OR COURT OF CALIFORNIA, COU	ITY OF						
STREET ADDRESS: MAILING ADDRESS:									
		ZIP CODE:							
		ICH NAME:							
CC		RVATORSHIP OF (name):				-			
	NOL	itteriorism of (name).							
			P	ROPOSED	CONSERVATEE				
		CONFIDENTIAL SUPPLE	MENTAL INFORMA	TION		CASE NUMBER:			
		Limited Conservato	orship of the 🔃 F	Person	Estate				
						HEARING DATE:			
1.	a.	Proposed conservatee (name):							
	b.	Date of birth:		C.	Age:	DEPT.:	TIME:		
	d.	Social security number:			J	DEFT	TIVIE.		
	u.	Social Security Humber.							
2.		e person completing this form, am ceeding.	the (check each that a	pplies)	petitione	r prop	osed conservator	in this	
3.		ABILITY TO PROVIDE PROPERLY FOR PERSONAL NEEDS* The following facts and circumstances supplement and support the petition's assertions that the proposed conservatee is unable to provide properly for personal needs for physical health, food, clothing, or shelter (specify in detail, expanding on the reasons in the petition; give specific examples from the proposed conservatee's daily life showing significant, ongoing behavior patterns):							
a. Physical health (give examples showing the proposed conservatee's inability to move and exercise, maintain personal hy make and attend routine medical appointments, take medication as prescribed, etc.):							al hygiene,		
	b.	Continued in Attachment 3a Food (give examples showing the		's inability	to eat or drink, բ	orepare food, s	hop for food, etc.):		
	Continued in Attachment 3b. c. Clothing (give examples showing the proposed conservatee's inability to get dressed, do laundry, shop for clothing, etc.):						tc.):		
	[d. :	Continued in Attachment 3c Shelter <i>(give examples showing tl</i>		ee's inabili	ty to pay rent or	mortgage, pay	utility bills, keep ho	ouse, etc.):	
* If	[anv	Continued in Attachment 3d part of item 3 does not apply to th		rship, skip	it. check box 3	in item 10. and	explain why it does	s not apply.	

CONFIDENTIAL GC-312 CONSERVATORSHIP OF (name): CASE NUMBER: PROPOSED CONSERVATEE ABILITY TO MANAGE OWN FINANCIAL RESOURCES* The following facts and circumstances supplement and support the petition's assertions that the proposed conservatee is substantially unable to manage that person's own financial resources or to resist fraud or undue influence (specify in detail, expanding on the reasons in the petition; give specific examples from the proposed conservatee's daily life showing significant, ongoing behavior patterns): a. Financial resources (give examples of the proposed conservatee's substantial inability to manage money or property): Continued in Attachment 4a. b. Fraud or undue influence (give examples of the proposed conservatee's substantial inability to resist fraud or undue influence): Continued in Attachment 4b. * If any part of item 4 does not apply to the proposed conservatorship, skip it, check box 4 in item 10, and explain why it does not apply. 5. **RESIDENCE** (A "residence" is the place a person would tend to describe as "home," for example, an owned or rented single-family house or an apartment in a multiunit building, or an assisted-living, board-and-care, skilled-nursing, or other long-term care facility.) a. The proposed conservatee's residence is a (nature of residence; see above for examples): The proposed conservatee's **residence** is located at (street address, city, state): The proposed conservatee is **currently located** at the residence in item 5b other (street address, city, state): d. The proposed conservatee's **current location** is a (nature of current location; see above for examples): e. Ability to live in residence The proposed conservatee is living in the residence, and is able to continue living there unless circumstances change. (a) will need to be moved after a conservator is appointed (give specific reasons in item 5f). other (specify and give reasons in item 5f).

f. Specific reasons supporting the determination in item 5e about the proposed conservatee's ability to live in the residence:

(explain in item 5f).

Continued in Attachment 5f.

not living in the residence, and

will be able to return home by (date):

other (specify and give reasons in item 5f).

will not return to live there (give specific reasons in item 5f).

(a)

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CO	NSERVATORSHIP OF (name):		CASE NUMBER:			
	F	ROPOSED CONSERVATEE				
	ALTERNATIVES TO CONSERVATORSHIP I have consider below, either (1) I have attempted that alternative for the length reasons explained below that it is unsuitable or does not mealternative and have determined for the reasons explained by needs and therefore should not be attempted.	ner described and have determined for the ee's needs; or (2) I have not attempted that				
	a. A supported decisionmaking agreement, as defined in W	onmaking agreement, as defined in Welfare and Institutions Code section 21001				
	Continued in Attachment 6a.Designation of a health care surrogate under Probate Co	de section 4711				
	Continued in Attachment 6b. c. An advance health care directive under Probate Code se	ection 4600 et seq.				
	Continued in Attachment 6c. d. A power of attorney (general or limited, durable or nondu	rable) under Probate Code	e section 4000 et seq.			
	Continued in Attachment 6d. e. A trust, as defined in Probate Code section 82					
	Continued in Attachment 6e. f. Other alternatives considered or attempted					
	Continued in Attachment 6f.					

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CONSERVATORSHIP OF (name):	CASE NUMBER:
PROPOSED CONSERVATEE	
7. HEALTH OR SOCIAL SERVICES PROVIDED (complete all that apply):	
a. In the year immediately before the petition was filed, the proposed conservate example, doctor's visits, medical testing, hospitalizations, surgeries, administrations (describe the services and the circumstances in which they were provided; if reference to the conservation of the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided; if reference to the circumstances in which they were provided to the circumstances.	ration of medication, wound care, or therapy.
Continued in Attachment 7a. b. In the year immediately before the petition was filed, the proposed conservate example, companionship, assistance with personal hygiene, housekeeping, sl finances. (describe the services and the circumstances in which they were pro	hopping, cooking, or assistance managing
Continued in Attachment 7b. c. I do not know, and cannot reasonably find out, what, if any, health se were provided to the proposed conservatee in the year immediately before the	
8. KNOWLEDGE AND PREFERENCES The proposed conservatee (check all that apply) a. knows about does not know about the proposed conservatorship. b. agrees with does not agree with the proposed conservatorship.) I don't know. I don't know. Not applicable.
b. in item 4, on my own personal knowledge an affidavit (declaration) b c. in item 5, on my own personal knowledge an affidavit (declaration) b d. in item 6, on my own personal knowledge an affidavit (declaration) b e. in item 7, on my own personal knowledge an affidavit (declaration) b	s form are based, (check all that apply) by another person, attached as Attachment 3. by another person, attached as Attachment 4. by another person, attached as Attachment 5. by another person, attached as Attachment 6. by another person, attached as Attachment 7. by another person, attached as Attachment 8.
10. ITEMS THAT DO NOT APPLY The following items on this form, or parts of those items conservatorship. (for each item checked, explain why that item or part of an item does represented in the conservation of the conservation of the conservation of the conservation of the conservation.)	
Continued on Attachment 10. 11. Number of pages attached:	
The real section of pages all as its answer as the section of the	
DECLARATION	
I declare under penalty of perjury under the laws of the State of California that the foregoinon Date:	g is true and correct.

GC-312 [Rev. January 1, 2024]

(TYPE OR PRINT NAME)

(SIGNATURE)