



Children's Rights Project/Immigrant Rights Project



GUARDIANSHIP OF THE PERSON

APPENDICES

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**APPENDIX A:
Sample Child Care
Authorization and
Caregiver's Affidavit**



CHILD CARE AUTHORIZATION

I, , am the parent or guardian of the following child(ren), and legally entitled to grant this authorization.

CHILD'S NAME:

CHILD'S NAME:

DATE OF BIRTH:

DATE OF BIRTH:

CHILD'S NAME:

CHID'S NAME:

DATE OF BIRTH:

DATE OF BIRTH:

I grant authority, limited to the below defined powers, over the above child(ren) to:

NAME OF PERSON GRANTED AUTHORIZATION:

ADDRESS:

NAME OF PERSON GRANTED AUTHORIZATION:

ADDRESS:

The powers granted to _____ are the following (check and initial):

- To authorize medical and dental care for the above child(ren), including but not limited to medical examinations, x-rays, tests, anesthetic, surgical operation, hospital care, or other treatments that are needed or useful for my child. Such medical treatment shall only be provided upon the advice of and supervision by a physician, surgeon, dentist, or other medical practitioner licensed to practice in the United States; surgeon, dentist or other medical practitioner licensed to practice in the United States;
- To provide food and shelter for the above-named child(ren), and to make decisions regarding their day-to-day activities;
- To enroll the child(ren) in school and/or daycare and make educational decisions, including authority to consent to school-related activities and field trips;
- To transport the child(ren), including authorization to pick the child up from school or day-care;

- Other powers granted (for example if you want the caretaker to have authority to take the child(ren) out of state, write that here):

CHECK ONE:

- This grant of authority is effective as of _____ and shall remain in effect until terminated by the undersigned parent or guardian.
- This grant of authority shall be valid for the following time period:

FROM: _____ UNTIL: _____

Parent/Guardian's Signature: _____ Date: _____

Parent/Guardian's Signature: _____ Date: _____

NOTARY SEAL:

CAREGIVER'S AUTHORIZATION AFFIDAVIT

Use of this affidavit is authorized by Part 1.5 (commencing with Section 6550) of Division 11 of the California Family Code.

Instructions: Completion of Items 1 - 4 and the signing of the affidavit is sufficient to authorize enrollment of a minor in school and authorize school-related medical care. Completion of items 5 - 8 is additionally required to authorize any other medical care. Print clearly. The minor named below lives in my home and I am 18 of age or older.

1. Name of minor: _____

2. Minor's birth date: _____

3. My name (adult giving authorization): _____

4. My home address: _____

I am a grandparent, aunt, uncle, or other qualified relative of the minor (see back of this form for a definition of "qualified relative").

5. Check one of both (for example, if parent was advised and the other cannot be located):

I have advised the parent(s) or other person(s) having legal custody of the minor of my intent to authorize medical care and have received no objection.

I am unable to contact the parent(s) or other person(s) having legal custody of the minor at this time, to notify them of my intended authorization.

6. My date of birth: _____

7. My California driver's license or identification card number: _____

Warning: Do not sign this form if any of the statements above are incorrect, or you will be committing a crime punishable by a fine, imprisonment, or both.

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

Dated: _____

Signed: _____

Notices:

1. This declaration does not affect the rights of the minor's parents or legal guardian regarding the care, custody, and control of the minor and does not mean that the caregiver has legal custody of the minor.
2. A person who relies on this affidavit has no obligation to make any further inquiry or investigation.

Additional Information:

TO CAREGIVERS:

1. "Qualified relative," for purposes of item 5, means a spouse, parent, stepparent, brother, sister, stepbrother, stepsister, half-brother, half-sister, uncle, aunt, niece, nephew, first cousin, or any person denoted by the prefix "grand" or "great," or the spouse of any of the persons specified in this definition, even after marriage has been terminated by death or dissolution.
2. The law may require you, if you are not relative or currently licensed foster parent, to obtain a foster home license in order to care for a minor. If you have any questions, please contact your local department of social services.
3. If the minor stops living with you, you are required to notify any school, health care provider, or health care service plan to which you have given this affidavit. The affidavit is invalid after the school, health care provider, or health care service plan received notice that the minor no longer lives with you.
4. If you do not have the information requested in item 6 (California driver's license or I.D.), provide another form of identification such as your social security number or Medical number.

TO SCHOOL OFFICIALS:

1. Section 48204 of the Education Code provides that this affidavit constitutes a sufficient basis for determination of residence of the minor, without the requirement of a guardianship or other custody order, unless the school district determines from actual facts that the minor is not living with the caregiver.
2. The School district may require additional reasonable evidence that the caregiver lives at the address provided in item 4.

TO HEALTH CARE PROVIDERS AND HEALTH CARE SERVICE PLANS:

1. A person who act in good reliance upon a caregiver's authorization affidavit to provide medical or dental care, without actual knowledge of facts contrary to those stated on the affidavit, is not subject to criminal liability or to civil liability to any person, and is not subject to professional disciplinary action, for such reliance if the applicable portions of the form are completed.
2. This affidavit does not confer dependency for health care coverage purposes.

**FAMILY.
CODE
SECTION
6550-
6552**

6550 (a) A caregiver's authorization affidavit that meets the requirements of this part authorizes a caregiver 18 years of age or older who completes items 1 to 4, inclusive, of the affidavit provided in Section 6552 and signs the affidavit to enroll a minor in school and consent to school-related medical care on behalf of the minor. A caregiver who is a relative and who completes items 1 to 8, inclusive, of the affidavit provided in Section 6552 and signs the affidavit shall have the same rights to authorize medical care and dental care for the minor that are given to guardians under Section 2353 of the Probate Code. The medical care authorized by this caregiver who is a relative may include mental health treatment subject to the limitations of Section 2356 of the Probate Code.

(b) The decision of a caregiver to consent to or to refuse medical or dental care for a minor shall be superseded by any contravening decision of the parent or other person having legal custody of the minor, provided the decision of the parent or other person having legal custody of the minor does not jeopardize the life, health, or safety of the minor.

(c) A person who acts in good faith reliance on a caregiver's authorization affidavit to provide medical or dental care, without actual knowledge of facts contrary to those stated on the affidavit, is not subject to criminal liability or to civil liability to any person, and is not subject to professional disciplinary action, for that reliance if the applicable portions of the affidavit are completed. This subdivision applies even if medical or dental care is provided to a minor in contravention of the wishes of the parent or other person having legal custody of the minor as long as the person providing the medical or dental care has no actual knowledge of the wishes of the parent or other person having legal custody of the minor.

(d) A person who relies on the affidavit has no obligation to make any further inquiry or investigation.

(e) Nothing in this section relieves any individual from liability for violations of other provisions of law.

(f) If the minor stops living with the caregiver, the caregiver shall notify any school, health care provider, or health care service plan that has been given the affidavit. The affidavit is invalid after the school, health care provider, or health care service plan receives notice that the minor is no longer living with the caregiver.

(g) A caregiver's authorization affidavit shall be invalid, unless it substantially contains, in not less than 10-point boldface type or a reasonable equivalent thereof, the warning statement beginning with the word "warning" specified in Section 6552. The warning statement shall be enclosed in a box with 3-point rule

lines.

(h) For purposes of this part, the following terms have the following meanings:

(1) "Person" includes an individual, corporation, partnership, association, the state, or any city, county, city and county, or other public entity or governmental subdivision or agency, or any other legal entity.

(2) "Relative" means a spouse, parent, stepparent, brother, sister, stepbrother, stepsister, half brother, half sister, uncle, aunt, niece, nephew, first cousin, or any person denoted by the prefix "grand" or "great," or the spouse of any of the persons specified in this definition, even after the marriage has been terminated by death or dissolution.

(3) "School-related medical care" means medical care that is required by state or local governmental authority as a condition for school enrollment, including immunizations, physical examinations, and medical examinations conducted in schools for pupils.

APPENDIX B:
Sample Form Used in Special Immigrant
Juvenile Status Cases



Clerk stamps date here when form is filed.

This form must be used by a guardian or conservator, or by a petitioner for the appointment of a guardian or conservator, to request a waiver of court fees in the guardianship or conservatorship court proceeding or in any other civil action in which the guardian or conservator represents the interests of the ward or conservatee as a plaintiff or defendant.

If the ward or conservatee (including a proposed ward or conservatee if a petition for appointment of a guardian or conservator has been filed but has not yet been decided by the court) directly receives public benefits or is supported by public benefits received by another for their support, is a low-income person, or does not have enough income to pay for their household's basic needs and the court fees, you may use this form to ask the court to waive the court fees. The court may order you to answer questions about the finances of the ward or conservatee. If the court waives the fees, the ward or conservatee, their estate, or someone with a duty to support the ward or conservatee, may still have to pay later if:

- You cannot give the court proof of the ward's or conservatee's eligibility,
- The ward's or conservatee's financial situation improves during this case, or
- You settle the civil case on behalf of the ward or conservatee for **\$10,000** or more. The trial court that waives fees will have a lien on any such settlement in the amount of the waived fees and costs. The court may also charge the ward or conservatee, or their estate, any collection costs.

Fill in court name and street address:

Superior Court of California, County of
Los Angeles
Stanley Mosk Courthouse
111 North Hill Street
Los Angeles CA 90012

Fill in case number and name:

Case Number:

Case Name:
Guardianship of Krista Maria Hamilton
Doe

1 Your Information (guardian or conservator, or person asking the court to appoint a guardian or conservator):

Name: Krista Maria Hamilton DoePhone: 2139876543Street or mailing address: 1234 South Main StreetCity: Los Angeles State: CA Zip: 90015

2 Your Lawyer (if you have one): Name: Rebecca Brown

Firm or Affiliation: Public CounselState Bar No.: 289167Address: 610 S Ardmore AvePhone: 2133852977City: Los Angeles State: CA Zip: 90005 Email: rbrown@publiccounsel.orga. The lawyer has agreed to advance all or a portion of court fees or costs (check one): Yes No

b. (If yes, your lawyer must sign here.) Lawyer's signature: _____

If your lawyer is not providing legal-aid type services based on your or the ward's or conservatee's low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.

3 Ward's or Conservatee's Information (file a separate Request for each ward in a multiward case):

Name: Krista Maria Hamilton Doe

Age and date of birth (ward only):

Street or mailing address: 1234 South Main Street19 years old , 01/01/2005City: Los Angeles State: CA Zip: 90015Phone: 2139876543

4 Ward's or Conservatee's Lawyer, if any: Name: Rebecca Brown

Firm or Affiliation: Public CounselState Bar No.: 289167Address: 610 S Ardmore AvePhone: 2133852977City: Los Angeles State: CA Zip: 90005 Email: rbrown@publiccounsel.org

5 Ward or Conservatee's Job (job title; if not employed, so state): Not employed

Name of employer: _____

Employer's address: _____ State: _____ Zip: _____



Name of (Proposed) Ward or Conservatee:

Krista Maria Hamilton Doe

Case Number:

6 What court's fees or costs are you asking to be waived?

- Superior Court (See Information Sheet on Waiver of Superior Court Fees and Costs (form FW-001-INFO).)
Supreme Court, Court of Appeal, or Appellate Division of Superior Court (See Information Sheet on Waiver of Appellate Court Fees (form APP-015/FW-015-INFO).)

7 Check here if you asked the court to waive court fees for this case in the last six months. (If your previous request is reasonably available, please attach it to this form and check here):

8 Why are you asking the court to waive the ward's or conservatee's court fees?

- The ward or one or both of the ward's parents, or the conservatee or the conservatee's spouse or registered domestic partner, receive (check all that apply):
Supplemental Security Income (SSI) State Supplemental Payment (SSP) SNAP (Food Stamps)
IHSS (In-Home Supportive Services) CalWORKS or Tribal TANF Medi-Cal
County Relief/General Assistance CAPI (Cash Assistance Program for Aged, Blind, and Disabled)
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program)
Unemployment Compensation

(Names and relationships to ward or conservatee of persons who receive the public benefits listed above):

Krista Maria Hamilton Doe - self

b. The gross monthly income of the ward's or conservatee's household (before deductions for taxes) is less than the amount listed below. (If you check 8b, you must fill out items 14, 15, and 16 on page 4 of this form.)*

Table with 6 columns: Family Size, Family Income, Family Size, Family Income, Family Size, Family Income. Includes a note: 'If more than 6 people at home, add \$896.67 for each extra person.'

c. The ward's or conservatee's household does not have enough income to pay for its basic needs and the court fees. I ask the court to (check one, and you must fill out items 14, 15, 16, 17, and 18 on page 4):*

- (1) Waive all court fees and costs. (2) Waive some court fees and costs.
(3) Let the (proposed) guardian or conservator, on behalf of the (proposed) ward or conservatee, make payments over time.

* (Do not include income of guardian or conservator living in the household in 8b or 8c or count them in family size in 8b. unless they are a parent of the ward or the spouse or registered domestic partner of the conservatee.)

Guardians or petitioners for their appointment must complete items 9 and 10.

9 Ward's Estate: Person only, no estate. Inventory or petition estimated value:

Source (e.g., gift, inheritance, settlement, judgment, insurance): Est. collection date:

10 Ward's Parents' Information:

a. Name of ward's parent Reyna Doe Deceased (date of death):

Street or mailing address: Guatemala

City: State: Zip:

Phone:

b. Name of ward's parent: John Hamilton Deceased (date of death): 06/2015

Street or mailing address:

City: State: Zip:

Phone:

c. Ward's parents are (check all that apply): married living together separated divorced

Support order for ward? No Yes Payable to (name):

Payor (name):

Court: Case Number:

Date of order (if multiple, date of latest): Monthly amount:



Name of (Proposed) Ward or Conservatee:

Krista Maria Hamilton Doe

Case Number:

Conservators or petitioners for their appointment must complete items 11–13.

11 Conservatee's Estate: Person only, no estate.

Inventory or petition estimated value:

Est. collection date:

12 Conservatee's Spouse's or Registered Domestic Partner's Information:

Name of conservatee's spouse or registered domestic partner: _____ Spouse Partner

Date of marriage or partnership: _____ Deceased (date of death): _____

Street or mailing address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Name of employer (if none, so state): _____

Employer's address: _____ State: _____ Zip: _____

The conservatee's spouse or partner is is not managing, or following appointment of a conservator is planning to manage, some or all of the couple's community property outside the conservatorship estate.

If you selected "is" above: The income, money, and property shown on page 4 includes does not include the income and property managed, or expected to be managed, by the spouse/partner outside the estate.

Divorced (date of final judgment or decree): _____

Court: _____

Case Number: _____ Support order for conservatee? No Yes

Date of support order (if multiple, date of latest): _____ Monthly amount: _____

13 The Conservatee and Trusts:

The conservatee:

a. is is not a trustor or settlor of a trust.

b. is is not a beneficiary of a trust.

If you selected "Is" to complete any of the above statements, identify and provide, in an attachment to this Request, the current address and telephone number of the current trustee(s) of each trust, describe the general terms of and value of each trust and the nature and value of the conservatee's interest in each trust, and the amount(s) and frequency of any distributions to or for the benefit of the conservatee prior to your appointment as conservator of which you are aware. (You may use Judicial Council form MC-025 for this purpose.)

All applicants who checked item 8b or item 8c on page 2 must continue to and follow the instructions for completion of items 14–16 or items 14–18 on page 4, before signing below.

The information I have provided on this form and all attachments about the (proposed) ward or conservatee is true and correct to the best of my information and belief. The information I have provided on this form and all attachments concerning myself is true and correct. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: 07/26/2024

Krista Maria Hamilton Doe
Print your name here


Sign here



Name of (Proposed) Ward or Conservatee:

Case Number:

Krista Maria Hamilton Doe

If you checked 8a on page 2, do not fill out below. If you checked 8b, you must answer questions 14–16. If you checked 8c, you must answer questions 14–18. If you need more space, attach form MC-025 or attach a sheet of paper, and write "Financial Information" and the ward's or conservatee's name and case number at the top.

14 Check here if the ward's or conservatee's income changes a lot from month to month. If it does, complete the form based on their average income for the past 12 months.

15 Ward's or Conservatee's Gross Monthly Income

a. List the source and amount of any income the ward or conservatee gets each month, including: wages or other income from work before deductions, spousal/child support, retirement, social security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income, reimbursement for job-related expenses, gambling or lottery winnings, etc.

- (1) \$
(2) \$
(3) \$
(4) \$
(5) \$

b. Total monthly income: \$

16 Ward's or Conservatee's Household's Income

a. List the income of all other persons living in the ward's or conservatee's home who depend in whole or in part on them for support, or on whom they depend in whole or in part for support.

Table with columns: Name, Age, Relationship, Gross Monthly Income. Rows 1-10.

b. Total monthly income of persons above: \$

Total monthly income and household income (15b plus 16b): \$

17 Ward's or Conservatee's Household's Money and Property

a. Cash \$

b. All financial accounts (list bank name and amount):

- (1) \$
(2) \$
(3) \$

c. Cars, boats, and other vehicles

Table with columns: Make / Year, Fair Market Value, How Much You Still Owe. Rows 1-3.

d. Real estate

Table with columns: Address, Fair Market Value, How Much You Still Owe. Rows 1-2.

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.):

Table with columns: Describe, Fair Market Value, How Much You Still Owe. Rows 1-2.

18 Ward's or Conservatee's Household's Monthly Deductions and Expenses

a. List any payroll deductions and the monthly amount below:

- (1) \$
(2) \$
(3) \$
(4) \$

b. Rent or house payment and maintenance \$

c. Food and household supplies \$

d. Utilities and telephone \$

e. Clothing \$

f. Laundry and cleaning \$

g. Medical and dental expenses \$

h. Insurance (life, health, accident, etc.) \$

i. School, child care \$

j. Child, spousal support (another marriage) \$

k. Transportation, gas, auto repair and insurance \$

l. Installment payments (list each below):

- Paid to:
(1) \$
(2) \$
(3) \$

m. Wages/earnings withheld by court order \$

n. Any other monthly expenses (list each below).

- Paid to: How Much?
(1) \$
(2) \$
(3) \$

Total monthly expenses (add 18a – 18n above): \$

To list any other facts you want the court to know, such as the (proposed) ward's or conservatee's unusual medical expenses, etc, attach form MC-025 or attach a sheet of paper and write "Financial Information" and the (proposed) ward's or conservatee's name and case number at the top.

Check here if you attach another page. []

Important! If the ward's or conservatee's financial situation or ability to pay court fees improves, you must notify the court within five days on form FW-010-GC.

Do not include income of guardian or conservator living in the household in item 16, their money and property in item 17, or their deductions and expenses in item 18 unless they are a parent of the ward or the spouse or registered domestic partner of the conservatee.

Clerk stamps date here when form is filed.

1 (Proposed) guardian or conservator who asked the court to waive court fees for (proposed) ward or conservatee:

Name: Krista Maria Hamilton Doe
 Street or mailing address: 1234 South Main Street
 City: Los Angeles State: CA Zip: 90015
 Telephone: 2139876543

2 Lawyer, if person in 1 has one:

Name: Rebecca Brown State Bar No: 289167
 Firm or Affiliation: Public Counsel
 Street or mailing address: 610 S Ardmore Ave
 City: Los Angeles State: CA Zip: 90005
 E-mail: rbrown@publiccounsel.org Telephone: 2133852977

3 (Proposed) ward or conservatee:

Name: Krista Maria Hamilton Doe
 Street or mailing address: 1234 South Main Street
 City: Los Angeles State: CA Zip: 90045
 Telephone: 2139876543

4 Lawyer for (proposed) ward or conservatee, if any:

Name: Rebecca Brown State Bar No: 289167
 Firm or Affiliation: Public Counsel
 Street or mailing address: 610 S Ardmore Ave
 City: Los Angeles State: CA Zip: 90005
 E-mail: rbrown@publiccounsel.org Telephone: 2133852977

5 A request to waive court fees was filed on (date):

The court made a previous fee waiver order in this case on (date):

Fill in court name and street address:

**Superior Court of California, County of
Los Angeles**
Stanley Mosk Courthouse
111 North Hill Street
Los Angeles CA 90012

Fill in case number and name:

Case Number:**Case Name:**

Guardianship of Krista Maria Hamilton Doe

Read this form carefully. All checked boxes are court orders.

Notice: The court may order you to answer questions about the ward's or conservatee's finances after granting a waiver and may later order payment of the waived fees from his or her estate. If this happens and the fees are not paid, the court can also charge collection fees. The court may also direct you to make efforts to collect money to pay back waived fees from persons who owe a duty to support the ward or conservatee. If there is a change in the ward's or conservatee's financial circumstances during this case that increases his or her ability to pay fees and costs, you must notify the trial court within five days. (Use form FW-010-GC.)

If this case is an action against another party and you win the case on behalf of the ward or conservatee, the trial court may order the other side to pay some or all of the waived fees. If you settle the matter for **\$10,000** or more, the trial court will have a lien on the settlement in the amount of the waived fees. The trial court may not dismiss the case until the lien is paid.

The court may also have a lien against the ward's or conservatee's estate that must be paid before the estate is distributed, the guardianship or conservatorship proceeding is concluded, and you are discharged as guardian or conservator.

6 After reviewing your: Request to Waive Court Fees Request to Waive Additional Court Fees the court makes the following orders:

a. The court **grants** your request concerning the ward's or conservatee's court fees and costs, as follows:

(1) **Fee Waiver.** The court grants your request and waives the fees and costs listed below.

(Cal. Rules of Court, rules 3.55 and 8.818.) You do not have to pay the court fees for the following:

- Filing papers in superior court
- Making copies and certifying copies
- Sheriff's fee to give notice
- Court fee for phone hearing
- Giving notice and certificates
- Sending papers to another court department

(List continued on next page.)



Name of (Proposed) Ward or Conservatee:

Case Number:

Krista Maria Hamilton Doe

- 6 a. (1)
 - Reporter’s fee for attendance at hearing or trial, if you request that the court provide an official reporter
 - Assessment for court investigations under Probate Code section 1513, 1826, or 1851
 - Preparing, certifying, copying, and sending the clerk’s transcript on appeal
 - Holding in trust the deposit for a reporter’s transcript on appeal under rule 8.130 or 8.834
 - Making a transcript or copy of an official electronic recording under rule 8.835

(2) **Additional Fee Waiver.** The court grants your request and waives the additional superior court fees and costs that are checked below. (*Cal. Rules of Court, rule 3.56.*) You do not have to pay for the checked items.

- | | |
|---|---|
| <input type="checkbox"/> Jury fees and expenses | <input type="checkbox"/> Fees for a peace officer to testify in court |
| <input type="checkbox"/> Fees for court-appointed experts | <input type="checkbox"/> Court-appointed interpreter fees for a witness |
| <input type="checkbox"/> Other (<i>specify</i>): _____ | |

b. The court **denies** your fee waiver request, as follows:

Warning! If you miss the deadline below, the court cannot process your request for hearing or the court papers you filed with your original request. If the papers were a notice of appeal, the appeal may be dismissed.

(1) The court **denies** your request because it is incomplete. You have **10 days** after the clerk gives notice of this order (see date of service on next page) to:

- Pay the ward’s or conservatee’s fees and costs, or
- File a new revised request that includes the items listed: Below On Attachment 6b(1)

(2) The court **denies** your request because the information you provided on the request shows that the ward or conservatee is not eligible for the fee waiver for the reasons specified:

Below On Attachment 6b(2)

The court has enclosed a blank *Request for Hearing About Court Fee Waiver Order (Ward or Conservatee)(Superior Court)* (form FW-006-GC). You have **10 days** after the clerk gives notice of this order (see date of service on next page) to:

- Pay the fees and costs in full or the amount listed in c below, or
- Ask for a hearing in order to show the court more information. (*Use form FW-006-GC to request hearing.*)

c. (1) The court needs more information to decide whether to grant your request. You must go to court on the date on page 3. The hearing will be about questions regarding your eligibility specified:

Below On Attachment 6c(1)

(2) Bring the items of proof to support your request, if reasonably available, that are listed:

Below On Attachment 6c(2)




Name of (Proposed) Ward or Conservatee:

Krista Maria Hamilton Doe

Case Number:

Warning! If item c is checked, and you do not go to court on your hearing date, the judge will deny your request to waive court fees, and you will have 10 days to pay the ward's or conservatee's fees. If you miss that deadline, the court cannot process the court papers you filed with your request. If the papers were a notice of appeal, the appeal may be dismissed.

NOTE TO GUARDIAN or CONSERVATOR: If there are unpaid court fees after a denial of a request for a fee waiver, your case—including the guardianship or conservatorship proceeding if the waiver is requested in that matter—might not go forward. After a denial, you may choose to advance the court costs yourself to ensure that the case proceeds. If you or another person is appointed as guardian or conservator, you would have an opportunity to be reimbursed for such advances from the assets of the guardianship or conservatorship estate, if any, as allowable expenses of administration. You might also have the right to reimbursement for advanced court costs from persons with an obligation to support the ward or conservatee from assets not part of his or her estate, such as a parent of the ward, the spouse or registered domestic partner of the conservatee who is managing the couple's community property outside the conservatorship estate, or the trustee of a trust of which the conservatee is a beneficiary.

	Date: _____	Time: _____	Name and address of court if different from above: _____ _____ _____ _____
	Dept.: _____	Room: _____	

Date: _____



Signature of (check one): Judicial Officer Clerk, Deputy



Request for Accommodations. Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least 5 days before your hearing. Contact the clerk's office for *Request for Accommodation*, Form MC-410. (Civil Code, § 54.8.)

Clerk's Certificate of Service

I certify that I am not involved in this case and (check one):

- I handed a copy of this Order to the party and attorney, if any, listed in ① and ②, at the court, on the date below.
- This order was mailed first class, postage paid, to the party and attorney, if any, at the addresses listed in ① and ②, from (city): _____, California, on the date below.
- A certificate of mailing is attached.

Date: _____

Clerk, by _____, Deputy
Name: _____

This is a Court Order.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): Rebecca Brown 289167 Public Counsel 610 S Ardmore Ave Los Angeles CA 90005	TELEPHONE AND FAX NOS.: 2133852977 2132014727	FOR COURT USE ONLY
ATTORNEY FOR (Name): Krista Maria Hamilton Doe		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse		
<input type="checkbox"/> ESTATE OF <input checked="" type="checkbox"/> GUARDIANSHIP OF <input type="checkbox"/> CONSERVATORSHIP OF (Name): Krista Maria Hamilton Doe		
<input type="checkbox"/> DECEDENT <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> CONSERVATEE		
ORDER PRESCRIBING NOTICE (PROBATE)		CASE NUMBER:

THE COURT ORDERS

1. The time and place of hearing* on the petition for
- a. compensation on account (Prob. Code, §§ 8547(d), 10830)
 - b. authority to continue decedent's business (Prob. Code, §§ 9760-9763)
 - c. order vacating order confirming sale (Prob. Code, §§ 10350, 10351)
 - d. court authorization for medical treatment (Prob. Code, §§ 2357(c), 3201)
 - e. appointment of a limited conservator (Prob. Code, § 1822)
 - f. other (specify): **Notice of Hearing and Petition for Appointment of Guardian of Minor and Special Immigrant Juvenile Status Findings**

(hearing) is set for

Date:	Time:	Dept.:	Room:
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Address of court: same as noted above other (specify):

2. Petitioner shall cause notice of the hearing to be
- a. served at least (specify): **15** days before hearing personally upon (name): **mother, father, minor person with physical custody**
 - b. mailed at least (specify): **15** days before hearing, in the manner prescribed by Probate Code section 1215 to the persons listed below listed on Attachment 2b.

<u>Name</u>	<u>Address</u>
1) Department of Children & Families	201 Centre Plaza Drive, Monterey Park, CA 91754 Attn: Guardianship Section

2) All second degree relatives, which includes: grandparents (maternal and paternal), brothers and sisters over the age of 12

- c. (for limited conservatorship only) mailed to the regional center identified in Probate Code section 1827.5.

Date:

JUDGE OF THE SUPERIOR COURT

SIGNATURE FOLLOWS LAST ATTACHMENT

* This form is not sufficient as Notice of Hearing.

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NO.: 289167 NAME: Rebecca Brown FIRM NAME: Public Counsel STREET ADDRESS: 610 S Ardmore Ave CITY: Los Angeles STATE: CA ZIP CODE: 90005 TELEPHONE NO.: 2133852977 FAX NO.: 2132014727 E-MAIL ADDRESS: rbrown@publiccounsel.org ATTORNEY FOR (name): Krista Maria Hamilton Doe	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse	
GUARDIANSHIP OF (name): Krista Maria Hamilton Doe	CASE NUMBER:
PETITION FOR APPOINTMENT OF GUARDIAN OF <input checked="" type="checkbox"/> MINOR* <input type="checkbox"/> MINORS* <input checked="" type="checkbox"/> Person** <input type="checkbox"/> Estate**	HEARING DATE AND TIME: DEPT.:

1. **Petitioner (name each):** Krista Maria Hamilton Doe

requests that

- a. (name): **Jane Doe**
 (address): **1234 South Main Street, Los Angeles, CA 90015**
 (telephone): **(213) 987-6543**
 be appointed guardian of the PERSON of the minor or minors named in item 2 and *Letters* issue upon qualification.
- b. (Not applicable to proposed wards 18 years of age and older.)
 (name):
 (address):
 (telephone):
 be appointed guardian of the ESTATE of the minor or minors named in item 2 and *Letters* issue upon qualification.
- c. (1) bond not be required because the petition is for guardian of the person only because the proposed guardian is a corporate fiduciary or an exempt government agency for the reasons stated in Attachment 1c.
 (2) \$ bond be fixed. It will be furnished by an authorized surety company or as otherwise provided by law. (Specify reasons in Attachment 1c if the amount is different from the minimum required by Prob. Code, § 8482.)
 (3) \$ in deposits in a blocked account be allowed. Receipts will be filed. (Specify institution and location):
- d. authorization be granted under Probate Code section 2590 to exercise the powers specified in Attachment 9.
- e. orders relating to the powers and duties of the proposed guardian of the person under Probate Code sections 2351–2358 be granted (specify orders, facts, and reasons in Attachment 1e).
- f. an order dispensing with notice to the persons named in Attachment 10 be granted.
- g. other orders be granted (specify in Attachment 1g).

2. Attached is a copy of *Guardianship Petition—Child Information Attachment* (form GC-210(CA)) for each minor for whom this petition requests the appointment of a guardian. The full legal name and date of birth of each minor is:

- a. Name: **Krista Maria Hamilton Doe** Date of Birth (month/day/year): **01/01/2005**
- b. Name: Date of Birth (month/day/year):
- c. Name: Date of Birth (month/day/year):
- d. Name: Date of Birth (month/day/year):

The names and dates of birth of additional minors are specified on Attachment 2 to this petition.

*Under section 1510.1(d) of the Probate Code, the terms *child*, *minor*, and *ward* include a youth 18 to 20 years of age.

**You MAY use this form or form GC-210(P) for a guardianship of the person. You MUST use this form for a guardianship of the estate or of the person and estate. Do NOT use this form for a temporary guardianship.

GUARDIANSHIP OF <i>(name)</i> : Krista Maria Hamilton Doe	CASE NUMBER:
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3. Petitioner is
- a. related to the minor or minors named in item 2, as shown in item 7 of each minor's attached form GC-210(CA).
 - b. the minor named in item 2, who is 12 years of age or older.
 - c. another person on behalf of minor or minors named in item 2, as shown in item 7 of each minor's attached form GC-210(CA).
4. The proposed guardian is *(check all that apply)*:
- a. a nominee *(affix a copy of nomination as Attachment 4a or file Nomination of Guardian (form GC-211, items 2 and 3) with this petition.*
 - b. related to the minor or minors named in item 2, as shown in item 3 of each minor's attached form GC-210(CA).
 - c. other, as shown in item 3 of each minor's attached form GC-210(CA).
 - d. a professional fiduciary within the meaning of the Professional Fiduciaries Act. The proposed guardian's license status is shown in item 1 on page 1 of the attached Professional Fiduciary Attachment. *(Use form GC-210(A-PF)/GC-310(A-PF) for this attachment.)*
5. Petitioner, with intent to adopt, has accepted or intends to accept physical care or custody of the minor.
6. A person other than the proposed guardian has been nominated as the guardian of the minor by will other writing. A copy of the nomination is affixed as Attachment 6. *(Specify name and address of nominee in item 2 of minor's attached form GC-210(CA).)*
7. Character and estimated value of property of the estate *(complete if petition requests appointment of a guardian of the estate or the person and estate)*:
- a. Personal property: \$
 - b. Annual gross income from all sources, including real and personal property, wages, pensions, and public benefits: \$
 - c. **Total:** \$ _____
 - d. Real property: \$

8. Appointment of a guardian of the person estate of the minor or minors named in item 2 is necessary or convenient for the following reasons:

The Petitioner and minor, Krista Maria Hamilton Doe is the sister of the proposed guardian, Jane Doe. The Petitioner was welcomed into the Proposed Guardian's home and has been cared for in her custody. The Petitioner requests that her sister be appointed her legal guardian under section 1510.1 of the California Probate Code, and as her guardian have" the care, custody, and control of, and ha[ve] charge of the education" of Krista pursuant to section 2351(a) of the California Probate Code. It is in Krista's best interest that Jane Doe be her legal guardian because guardianship is necessary and convenient and the guardianship best promotes Krista's health, safety, and welfare. See Cal. Prob. Code §1514; Cal. Fam. Code§ 301 1 (a).

Krista's father is deceased and her mother is in Guatemala. Absent the guardianship, there will be no one in the United States with the authority to make necessary decisions for Krista.

Continued in Attachment 8. Parental custody would be detrimental to the minor or minors named in item 2 *(not applicable to proposed wards 18 years of age and older).*

9. Granting the proposed guardian of the estate powers to be exercised independently under Probate Code section 2590 would be to the advantage and benefit and in the best interest of the guardianship estate. Reasons for this request and the powers requested are specified in Attachment 9.
10. Notice to the persons named in Attachment 10 should be dispensed with under Probate Code section 1511 because
- they cannot with reasonable diligence be given notice *(specify names and efforts to locate in Attachment 10).*
 - giving notice to them would be contrary to the interest of justice *(specify names and reasons in Attachment 10).*

GUARDIANSHIP OF <i>(name)</i> : Krista Maria Hamilton Doe	CASE NUMBER:
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11. (Complete this item if this petition is filed by a person who is not related to a minor named in item 2 and is not a petition for appointment of a guardian of the estate only.)
- a. Petitioner is the proposed guardian and will promptly furnish all information requested by any agency referred to in Probate Code section 1543.
- b. Petitioner is not the proposed guardian. A statement by the proposed guardian that he or she will promptly furnish all information requested by any agency referred to in Probate Code section 1543 is affixed as Attachment 11b.
- c. The proposed guardian's home is is not a licensed foster family home.
- d. The proposed guardian has never filed a petition for adoption of the minor except as specified in Attachment 11d.

12. Attached to this petition is a *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form GC-120) concerning each child under 18 years of age listed in item 2 (*guardianship of the person or person and estate only*).


13. Filed with this petition are the following (*check all that apply*):

- Consent of Proposed Guardian* (form GC-211, item 1)
- Nomination of Guardian* (form GC-211, items 2 and 3)
- Consent to Appointment of Guardian and Waiver of Notice* (form GC-211, item 4)
- Petition for Appointment of Temporary Guardian* (form GC-110)
- Petition for Appointment of Temporary Guardian of the Person* (form GC-110(P))
- Confidential Guardianship Screening Form* (form GC-212)
- Petition for Special Immigrant Juvenile Findings* (form GC-220)

Other (*specify*):

14. All attachments to this form are incorporated by this reference as though placed here in this form. Number of pages attached:

Date: 07/25/2024



 (SIGNATURE OF ATTORNEY*)

***(All petitioners and the proposed ward—if he or she is at least 18 years of age but not yet 21 and not a petitioner—must also sign.)**

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

Date: 07/25/2024

Krista Maria Hamilton Doe

 (TYPE OR PRINT NAME)



 (SIGNATURE OF PETITIONER)

 (TYPE OR PRINT NAME)

 (SIGNATURE OF PETITIONER)

 (TYPE OR PRINT NAME)

 (SIGNATURE OF PETITIONER)

I consent to the appointment of the person named in item 1.a as guardian of my person and to his or her performance of the duties of a guardian on my behalf.

Date: 07/25/2024

Krista Maria Hamilton Doe

 (TYPE OR PRINT NAME)



 (SIGNATURE OF PROPOSED WARD)

SHORT TITLE: — Guardianship of Krista Maria Hamilton Doe	CASE NUMBER:
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ATTACHMENT (Number): 10

(This Attachment may be used with any Judicial Council form.)

1. Father: John Hamilton - Deceased
2. Paternal Grandfather:- Tom Hamilton- Deceased
3. Paternal Grandmother:- Luisa Felix- Deceased
4. Maternal Grandfather:- Marco Doe- Deceased
5. Maternal Grandmother: Lupe Diaz- Deceased

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page _____ of _____

(Add pages as required)

Guardianship of *(all children's names)*: Krista Maria Hamilton Doe

This child's name: Krista Maria Hamilton Doe

Fill out a separate copy of this form for **each child** for whom your petition asks the court to appoint a guardian.

This form is attached to the Petition, **form GC-210, item 2,** or **form GC-210(P), item 8.**

The petition asks the court to appoint a guardian of this child's *(specify)*: person estate person and estate.

1 Tell the court about this child

a. Child's full legal name: Krista Maria Hamilton Doe Date of birth: 01/01/2005
First Middle Last mm/dd/yyyy

b. Child's current address: 1234 South Main Street, Los Angeles, CA 90015

c. Indian child inquiry *(Complete only if your petition asks the court to appoint a guardian of this child's person or person and estate. If your petition asks the court to appoint a guardian of this child's estate only, skip this item and go to item 1d.)*

- I have asked whether the child is or may be a member of one or more Indian tribes recognized by the federal government, or eligible for membership in such a tribe and the biological child of a tribal member, and whether the child or parents live or are domiciled on a reservation or rancheria or in an Alaskan Native village. Form ICWA-010(A), *Indian Child Inquiry Attachment*, is attached to this form.
- I have not asked about the child's Indian heritage because the parents are unavailable or deceased.

(For more information about your duties under the federal Indian Child Welfare Act (ICWA) (25 U.S.C. §§ 1901–1963) and California law, including making the inquiry and completing form ICWA-010(A) if the child is or may be an Indian child, see Information Sheet on Indian Child Inquiry Attachment and Notice of Child Custody Proceeding for Indian Child (form ICWA-005-INFO).)

d. Is this child married? Yes No Never married If you checked "No," was this child married in the past but the marriage was dissolved or ended in divorce? Yes No
(The court cannot appoint a guardian of the person for a minor child who is married or whose marriage was dissolved or ended in divorce.)

e. Is this child receiving public benefits? Yes No I don't know *(If you checked "Yes," fill in below.)*

Type of Aid	Monthly Benefit	Type of Aid	Monthly Benefit
<input type="checkbox"/> TANF (Temporary Asst. for Needy Families)	\$	<input type="checkbox"/> Other <i>(explain)</i> :	\$
<input type="checkbox"/> Social Security	\$	<input type="checkbox"/> Other <i>(explain)</i> :	\$
<input type="checkbox"/> Dept. Veterans Affairs Benefits	\$		

f. Name and address of the person with *legal* custody of this child: _____

g. *(Check this box and fill out below if the person the child lives with is not the person in f. with legal custody.)*
Name and address of the person this child lives with (who takes care of the child): Jane Doe
1234 South Main Street, Los Angeles, CA 90015



This child's name: Krista Maria Hamilton Doe**1 Tell the court about this child (continued)**

- h. (Check this box if this child has been involved in an adoption, juvenile court, marriage dissolution (divorce), domestic relations, child custody, or other similar court case.) Describe the court case below:

Type of Case	Court District or County and State or Tribe	Case Number (if known)

- i. (Check this box if this child is in or on leave from an institution supervised by the California Department of Developmental Services or the California Department of State Hospitals.) Write the name of the institution here:

2 List the names and addresses of this child's relatives and all other persons shown below:

Relationship	Name	Home Address (Street, City, State, Zip)
Mother	<u>John Hamilton</u>	<u>Deceased</u>
Father	<u>Reyna Doe</u>	<u>1234 South Main Street, Los Angeles, CA 90015</u>
Grandmother (Mother's mother)	<u>Lupe Diaz</u>	<u>Deceased</u>
Grandfather (Mother's father)	<u>Marco Doe</u>	<u>Deceased</u>
Grandmother (Father's mother)	<u>Luisa Felix</u>	<u>Deceased</u>
Grandfather (Father's father)	<u>Raul Hamilton</u>	<u>Deceased</u>
Sibling	<u>Margarita Hamilton</u>	<u>Guatemala</u>
Sibling	<u>Joshua Hamilton</u>	<u>Guatemala</u>
Sibling	<u>Miguel Doe</u>	<u>Guatemala</u>
Sibling	<u>Jane Doe</u>	<u>1234 South Main Street, Los Angeles, CA 90015</u>
Sibling	_____	_____
Sibling	_____	_____
Sibling	_____	_____

- (Check here if this child has additional relatives, including parents, grandparents, siblings, or half-siblings, and list their names and addresses on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Item 2: Other Relatives" at the top of the paper and attach it to this form.)



This child's name: Krista Maria Hamilton Doe**2 List the names and addresses of this child's relatives and all other persons shown below:**

Relationship	Name	Home Address (Street, City, State, Zip)
Spouse <i>(Guardianship of the estate only)</i>	_____	_____
Person nominated as guardian of this child <i>(if someone other than a proposed guardian named in 3)</i>	_____	_____
Indian custodian <i>(if any)</i>	_____	_____
Child's tribe <i>(if any and if known)</i>	_____	_____
<input type="checkbox"/> <i>(Check here if there is more than one tribe that the child may be eligible for membership in, and list the names and addresses on a separate sheet of paper. Write "Form GC-210(CA)," the name of the child, and "Attachment 2: Child's tribes" at the top of the paper and attach it to this form.)</i>		

3 Information about the proposed guardian:

- a. Name *(name all proposed guardians if more than one)*:
Jane Doe
- b. Relationship(s) to the child named in 1 *(check all that apply)*:
- Relative *(specify relationship(s) to the child of each proposed relative guardian)*:
Sister
- Not a relative *(explain interest in or connection to this child)*: _____
- c. Did the child's parent(s) nominate the proposed guardian(s)? Yes No I don't know
(If you checked "Yes," attach the written nomination as Attachment 3c.)
- d. Does this child currently live with the proposed guardian(s)? Yes No I don't know
If "Yes," how long has the child lived with the proposed guardian(s)? *(years, months)*: 1 year, 2 months
- e. If the court approves the guardianship, will this child live with the proposed guardian(s)? Yes No
- f. Does/do the proposed guardian(s) currently plan to adopt this child? Yes No I don't know

4 Explain why appointing a guardian for the child named in 1 would be in the child's best interest:
A legal guardianship will enable Proposed Guardian to make educational, medical, health, and other decisions for Minor. The guardianship best promotes Minor's health, safety, and welfare. See. Cal. Pro. Code § 3011(a).

- (Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Attachment 4: Guardianship—Best Interest of Child" at the top of the paper and attach it to this form.)*



This child's name: Krista Maria Hamilton Doe

5 Explain why appointing the person named in **3** to be this child's guardian would be in the child's best interest:

Jane Doe the sister of the Proposed Ward and has been caring for Krista since April 2020. Jane is willing and able to continue caring for Krista. She is providing Krista with a safe and loving home environment so that Krista is healthy and able to focus on school. Jane wants to continue caring for Krista who is a victim of trauma and is in a new country whose language, culture and customs are foreign to her. Guardianship is convenient and necessary here because Petitioner needs the guidance and supervision of her sister to maneuver and adapt to a new society. The Proposed Guardian needs to responsibly care for Petitioner and have the legal authority to advocate for her best interests and make medical and educational decisions on her behalf.

(Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Attachment 5: Proposed Guardian—Best Interest of Child" at the top of the paper and attach it to this form.)

6 a. Does one or do both of this child's parents agree:

(1) That the court needs to appoint a guardian for the child?

Parent (name): John Hamilton Yes No I don't know

Parent (name): Reyna Doe Yes No I don't know

(2) That the person named in **3** should be the child's guardian?

Parent (name): John Hamilton Yes No I don't know

Parent (name): Reyna Doe Yes No I don't know

b. If the child is an Indian child and in the care and custody of an Indian custodian, does the Indian custodian agree:

(1) That the court needs to appoint a guardian for the child?

Custodian (name): _____ Yes No I don't know

(2) That the person named in **3** should be the child's guardian?

Custodian (name): _____ Yes No I don't know

7 Check this box if you (the petitioner) are not the person named in **3**, and fill in below.

Your relationship to this child:

Relative (specify relationship): _____

Not a relative (explain your interest in or connection to this child):

8 Except as otherwise stated in this form, the statements made in the petition to which this form is attached fully apply to this child.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Rebecca Brown 289167 Public Counsel 610 S Ardmore Ave Los Angeles CA 90005 TELEPHONE NO.: 2133852977 FAX NO. (Optional): 2132014727 E-MAIL ADDRESS (Optional): rbrown@publiccounsel.org ATTORNEY FOR (Name): Krista Maria Hamilton Doe	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse	
GUARDIANSHIP OF THE <input checked="checked" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name): Krista Maria Hamilton Doe	
<input checked="checked" type="checkbox"/> CONSENT OF PROPOSED GUARDIAN <input type="checkbox"/> NOMINATION OF GUARDIAN <input type="checkbox"/> CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE	CASE NUMBER:

CONSENT OF PROPOSED GUARDIAN

1. I consent to serve as guardian of the person estate of the minor.

Date: 07/25/2024

Jane Doe

(TYPE OR PRINT NAME)



(SIGNATURE OF PROPOSED GUARDIAN)

NOMINATION OF GUARDIAN

2. I am a parent of the minor a donor of a gift to the minor. I nominate (name and address):

as guardian of the person estate of the minor.

3. I am a parent of the minor a donor of a gift to the minor. I nominate (name and address):

as guardian of the person estate of the minor.

Date:



(TYPE OR PRINT NAME)

(SIGNATURE)

NOTICE: The guardian of the person of a minor child has full legal and physical custody until the child becomes an adult or is adopted, the court changes guardians, or the court terminates the guardianship. Parents or other interested persons must petition the court to terminate the guardianship. The court will not do so unless the judge decides that termination would be in the child's best interest.

CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE

4. I consent to appointment of the guardian as requested in the *Petition for Appointment of Guardian of Minor*, filed on (date): 07/26/2024. I am entitled to notice in this proceeding, but I waive notice of hearing of the petition, including notice of any request for independent powers contained in it. I waive timely receipt of a copy of the petition. I also consent to Special Immigrant Juvenile Findings and waive notice of hearing and a copy of the petition.

07/25/2024
DATE

Krista Maria Hamilton Doe
(TYPE OR PRINT NAME)



(SIGNATURE)

Minor
RELATIONSHIP TO MINOR

07/25/2024
DATE

Jane Doe
(TYPE OR PRINT NAME)



(SIGNATURE)

Sister
RELATIONSHIP TO MINOR

07/25/2024
DATE

Margarita Hamilton
(TYPE OR PRINT NAME)



(SIGNATURE)

Sister
RELATIONSHIP TO MINOR

Continued on Attachment 4.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Rebecca Brown 289167 Public Counsel 610 S Ardmore Ave Los Angeles CA 90005 TELEPHONE NO.: 2133852977 FAX NO. (Optional): 2132014727 E-MAIL ADDRESS (Optional): rbrown@publiccounsel.org ATTORNEY FOR (Name): Krista Maria Hamilton Doe	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse	
PETITIONER: <i>(This section applies only to family law cases.)</i> RESPONDENT: OTHER PARTY:	
<i>(This section applies only to guardianship cases.)</i> GUARDIANSHIP OF (Name): Krista Maria Hamilton Doe Minor	CASE NUMBER:
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)	

1. I am a party to this proceeding to determine custody of a child.
2. My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are *(specify number)*: _____ minor children who are subject to this proceeding, as follows:
(Insert the information requested below. The residence information must be given for the last FIVE years.)

a. Child's name Krista Maria Hamilton Doe	Place of birth Guatemala	Date of birth 01/01/2005	Sex Female
Period of residence 05/2023 to present	Address 1234 South Main Street Los Angeles CA 90015 <input type="checkbox"/> Confidential	Person child lived with <i>(name and complete current address)</i> Jane Doe <input type="checkbox"/> Confidential Same	Relationship Sister
01/2023 to 05/2023	Child's residence <i>(City, State)</i> Anunciacion House, TX	Person child lived with <i>(name and complete current address)</i> ORR Shelter	Youth Shelter
01/2005 to 12/2022	Child's residence <i>(City, State)</i> Guatemala City, Guatemala	Person child lived with <i>(name and complete current address)</i> Reyna Doe, Same	Mother
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	
b. Child's name	Place of birth	Date of birth	Sex
<input type="checkbox"/> Residence information is the same as given above for child a. <i>(If NOT the same, provide the information below.)</i>			
Period of residence	Address	Person child lived with <i>(name and complete current address)</i>	Relationship
to present	<input type="checkbox"/> Confidential	<input type="checkbox"/> Confidential	
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	

- c. Additional residence information for a child listed in item a or b is continued on attachment 3c.
- d. Additional children are listed on form FL-105(A)/GC-120(A). *(Provide all requested information for additional children.)*

SHORT TITLE: Guardianship of Krista Maria Hamilton Doe	CASE NUMBER:
--	--------------

4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?
 Yes No (If yes, attach a copy of the orders (if you have one) and provide the following information):

Proceeding	Case number	Court <i>(name, state, location)</i>	Court order or judgment <i>(date)</i>	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court <i>(name, state, location)</i>
d. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency		
e. <input type="checkbox"/> Adoption		

5. One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one and provide the following information):

Court	County	State	Case number <i>(if known)</i>	Orders expire <i>(date)</i>
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency				
d. <input type="checkbox"/> Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child in this case? Yes No (If yes, provide the following information):

a. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	b. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	c. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child
---	---	---

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

Date: 07/25/2024

Krista Maria Hamilton Doe

 (TYPE OR PRINT NAME)



 (SIGNATURE OF DECLARANT)

7. Number of pages attached: _____

NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.

CONFIDENTIAL (DO NOT ATTACH TO PETITION)

GC-212

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Rebecca Brown 289167		<i>FOR COURT USE ONLY</i>	
Public Counsel 610 S Ardmore Ave Los Angeles CA 90005			
TELEPHONE NO.: 2133852977 FAX NO. (Optional): 2132014727			
E-MAIL ADDRESS (Optional): rbrown@publiccounsel.org			
ATTORNEY FOR (Name): Krista Maria Hamilton Doe			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES			
STREET ADDRESS: 111 North Hill Street			
MAILING ADDRESS: Same			
CITY AND ZIP CODE: Los Angeles 90012			
BRANCH NAME: Stanley Mosk Courthouse			
GUARDIANSHIP OF (Name): Krista Maria Hamilton Doe		CASE NUMBER:	
MINOR			
CONFIDENTIAL GUARDIAN SCREENING FORM		HEARING DATE AND TIME:	DEPT.:
Guardianship of <input checked="" type="checkbox"/> Person <input type="checkbox"/> Estate			

The proposed guardian must complete and sign this form. The person requesting appointment of a guardian must submit the completed and signed form to the court with the guardianship petition.
This form must remain confidential.

How This Form Will Be Used

This form is **confidential** and will not be a part of the public file in this case. Each proposed guardian must complete and sign a separate copy of this form under rule 7.1001 of the California Rules of Court. The information provided will be used by the court and by persons and agencies designated by the court to assist the court in determining whether to appoint the proposed guardian as guardian. The proposed guardian **must** respond to each item.

1. a. **Proposed guardian (name):** Jane Doe
b. Date of birth: 05/01/1995
c. Social security number: 123-45-445 d. Driver's license number: 7895466 State: CA
e. Telephone numbers: Home: 213-987-6543 Work: Other:
2. I am I am not required to register as a sex offender under California Penal Code section 290.
(If you checked "I am," explain in Attachment 2.)
3. I have I have not been charged with, arrested for, or convicted of a crime deemed to be a felony or a misdemeanor. (If you checked "I have," explain in Attachment 3.)
 (Check here if you have been arrested for drug or alcohol-related offenses.)
4. I have I have not had a restraining order or protective order filed against me in the last 10 years.
(If you checked "I have," explain in Attachment 4.)
5. I am I am not receiving services from a psychiatrist, psychologist, or therapist for a mental health-related issue.
(If you checked "I am," explain in Attachment 5.)
6. Do you, or does any other person living in your home, have a social worker or parole or probation officer assigned to him or her?
 Yes No (If you checked "Yes," explain in Attachment 6 and provide the name and address of each social worker, parole officer, or probation officer.)
7. Have you, or has any other person living in your home, been charged with, arrested for, or convicted of any form of child abuse, neglect, or molestation? Yes No (If you checked "Yes," explain in Attachment 7.)
8. I am I am not aware of any reports alleging any form of child abuse, neglect, or molestation made to any agency charged with protecting children (e.g., Child Protective Services) or any other law enforcement agency regarding me or any other person living in my home. (If you checked "I am," explain in Attachment 8 and provide the name and address of each agency.)
9. Have you, or has any other person living in your home, habitually used any illegal substances or abused alcohol?
 Yes No (If you checked "Yes," explain in Attachment 9.)

Page 1 of 2

GUARDIANSHIP OF (Name): Krista Maria Hamilton Doe	CASE NUMBER:
MINOR	

10. Have you, or has any other person living in your home, been charged with, arrested for, or convicted of a crime involving illegal substances or alcohol?
 Yes No (If you checked "Yes," explain in Attachment 10.)
11. Do you or does any other person living in your home suffer from mental illness?
 Yes No (If you checked "Yes," explain in Attachment 11.)
12. Do you suffer from any physical disability that would impair your ability to perform the duties of guardian?
 Yes No (If you checked "Yes," explain in Attachment 12.)
13. I have or may have I do not have an adverse interest that the court may consider to be a risk to, or to have an effect on, my ability to faithfully perform the duties of guardian.
 (If you checked "I have or may have," explain in Attachment 13.)
14. I have I have not previously been appointed guardian, conservator, executor, or fiduciary in another proceeding.
 (If you checked "I have," explain in Attachment 14.)
15. I have I have not been removed as guardian, conservator, executor, or fiduciary in any other proceeding.
 (If you checked "I have," explain in Attachment 15.)
16. I am I am not a private professional fiduciary, as defined in Business and Professions Code section 6501(f).
 (If you checked "I am," respond to item 17. If you checked "I am not," go to item 18.)
17. I am I am not currently licensed by the Professional Fiduciaries Bureau of the Department of Consumer Affairs. My license status and information is stated in item 1 on page 1 of the Professional Fiduciary Attachment signed by me and attached to the petition that proposes my appointment as guardian in this matter. (Complete and sign the Professional Fiduciary Attachment and attach it to the petition, or deliver it to the petitioner for attachment, before the petition is filed. See item 4d of the petition. Use form GC-210(A-PF)/GC-310(A-PF) for this attachment.)
18. I am I am not a responsible corporate officer authorized to act for (name of corporation):

 a California nonprofit charitable corporation that meets the requirements for appointment as guardian of the proposed ward under Probate Code section 2104. I certify that the corporation's articles of incorporation specifically authorize it to accept appointments as guardian. (If you checked "I am," explain the circumstances of the corporation's care of, counseling of, or financial assistance to the proposed ward in Attachment 18.)
19. I have I have not filed for bankruptcy protection within the last 10 years.
 (If you checked "I have," explain in Attachment 19.)

MINORS' CONTACT INFORMATION		
20. Minor's name: Krista Maria Hamilton Doe	School (name): Ellison Community College	
Home telephone: (213) 987-6543	School telephone: 310-689-8689	Other telephone:
21. Minor's name:	School (name):	
Home telephone:	School telephone:	Other telephone:
22. Minor's name:	School (name):	
Home telephone:	School telephone:	Other telephone:
<input type="checkbox"/> Information on additional minors is attached.		


DECLARATION

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

Date: **07/25/2024**

Jane Doe

(TYPE OR PRINT NAME OF PROPOSED GUARDIAN)



(SIGNATURE OF PROPOSED GUARDIAN)*

* Each proposed guardian must fill out and file a separate screening form.

ATTORNEY OR PARTY WITHOUT ATTORNEY: NAME: Rebecca Brown FIRM NAME: Public Counsel STREET ADDRESS: 610 S Ardmore Ave CITY: Los Angeles TELEPHONE NO.: 2133852977 E-MAIL ADDRESS: rbrown@publiccounsel.org ATTORNEY FOR (name): Krista Maria Hamilton Doe	STATE BAR NO.: 289167 STATE: CA ZIP CODE: 90005 FAX NO.: 2132014727	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse		
GUARDIANSHIP OF THE PERSON <input type="checkbox"/> AND ESTATE OF (name): Krista Maria Hamilton Doe <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> MINORS		
PETITION FOR SPECIAL IMMIGRANT JUVENILE FINDINGS		CASE NUMBER:

Petitioner (name each): **Krista Maria Hamilton Doe**

alleges:

- Petitioner is (check all that apply to a single petitioner or to more than one petitioner):
 - The proposed guardian of the person or the person and estate of the minor named in item 2. This petition is filed concurrently with the petition for my appointment as guardian.
 - The guardian of the person or the person and estate of the minor named in item 2. The order appointing me was filed in this case on (date): . Letters of Guardianship were issued on (date):
 - The minor named in item 2. I am at least 12 years of age. I was born on (date): **01/01/2005**
If there are two or more wards or proposed wards in this case, I am asking the court for an order only for myself.
 - The *guardian ad litem* for the minor named in item 2. A certified or conformed copy of the *Order Appointing Guardian Ad Litem—Probate* (form GC-101) is attached to this petition as Attachment 1d.
 - An adult relative (specify relationship): or other person on behalf of the minor named in item 2.
- (Name of Minor):* **Krista Maria Hamilton Doe**
is a national of (country): **Guatemala**
- This court has jurisdiction under California law "to make judicial determinations about the custody and care of juveniles" within the meaning of section 101(a)(27)(J) of the Immigration and Nationality Act (INA), 8 U.S.C. § 1101(a)(27)(J), and 8 C.F.R. § 204.11(a). The minor named in item 2 is under this court's jurisdiction and will remain under that jurisdiction if the court appoints (or has appointed) a guardian of his or her person in this proceeding.
- If a guardian of the person of the minor named in item 2 has been appointed and has qualified in this proceeding, the minor is placed under the custody of an individual or entity appointed by a California state or juvenile court located in the United States within the meaning of INA section 101(a)(27)(J), 8 U.S.C. § 1101(a)(27)(J).

* (In a guardianship case involving more than one ward, prepare a separate petition for each ward for whom you are seeking SIJ findings.)

GUARDIANSHIP OF THE PERSON <input type="checkbox"/> AND ESTATE OF (name): Krista Maria Hamilton Doe <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> MINORS	CASE NUMBER:
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Requested Findings

5. Reunification of the minor named in item 2 with one parent both parents is not viable under California law because of (check all that apply):
- abuse
- neglect
- abandonment
- another legal basis (specify):

Facts in support of this finding are stated below (for each parent with whom reunification is not viable, state the reasons that apply to that parent):

Krista's father, John Hamilton passed away in 2008. His death left Krista without provision for reasonable and necessary care or supervision. The death of her father also left Krista feeling sad and alone. She continues to suffer trauma from her father's death.

After her father's death, Krista's mother was unable to financially provide for and support Krista and her siblings. Krista did not have enough food to eat and was forced to work in the fields to provide food for her family.

Krista's father's abandonment falls within the definition of abandonment under Family Code Section 3402 (a) and the Welfare and Institutions Code Section 300(g).

Krista's mother also neglected Krista under Penal Code section 11165.2(b) because she failed to provide adequate food, clothing, shelter and supervision.

Please refer to the concurrently-filed declaration.

Additional facts are stated on Attachment 5 to this petition. (You may use Attachment to Judicial Council form [form MC-025](#) for this purpose.)

GUARDIANSHIP OF THE PERSON <input type="checkbox"/> AND ESTATE OF (name): Krista Maria Hamilton Doe <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> MINORS	CASE NUMBER:
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6. It is not in the best interest of the minor named in item 2 to be returned to the minor's or the parent's previous country of nationality or country of last habitual residence. (specify country or countries):
Guatemala

Facts in support of this finding are stated below:

It is not in Krista's best interest to return to Guatemala. Her father is deceased and her mother is unable to provide for all of Krista's needs. She did not have enough food to eat and was forced to work to try to provide for her family. She also faced violence by dangerous gangs. In contrast, Krista is now safe and well-cared for with her sister in Los Angeles. She is not working and she is able to attend school.

Please refer to the concurrently filed declaration.

Additional facts are stated on next page.

GUARDIANSHIP OF THE PERSON <input type="checkbox"/> AND ESTATE OF (name): Krista Maria Hamilton Doe <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> MINORS	CASE NUMBER:
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6. (continued):

Additional facts are stated on Attachment 6 to this petition. (You may use Attachment to Judicial Council form [\(form MC-025\)](#) for this purpose.)

7. All attachments to this form are incorporated by this reference as though placed here in this form. There are ___ pages attached.

Date: 07/25/2024

Rebecca Brown
(TYPE OR PRINT NAME OF ATTORNEY)

▶ 
 (SIGNATURE OF ATTORNEY*)

* All petitioners must also sign (Prob. Code, § 1020).

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

Date: 07/25/2024

Krista Maria Hamilton Doe
(TYPE OR PRINT NAME)

▶ 
 (SIGNATURE OF PETITIONER)

(TYPE OR PRINT NAME)

▶ _____
 (SIGNATURE OF PETITIONER)

(TYPE OR PRINT NAME)

▶ _____
 (SIGNATURE OF PETITIONER)

1 Sara Van Hofwegen (Cal. Bar No.266985)
Public Counsel
2 610 S. Ardmore Avenue
Los Angeles, CA 90005
3 (213) 201-4712

4 Pro Bono Attorney for Petitioner
[Redacted]

5
6 **SUPERIOR COURT OF THE STATE OF CALIFORNIA**
7 **FOR THE COUNTY OF LOS ANGELES**
8 **CENTRAL DISTRICT**
9

10 In re:

Case No. [Redacted]

11 **Guardianship of** [Redacted]
12 [Redacted]

DECLARATION OF [Redacted]
[Redacted] IN SUPPORT OF
GUARDIANSHIP AND REQUEST FOR
SPECIAL IMMIGRANT JUVENILE
STATUS FINDINGS

14 **Hearing:**

Date:

Time:

Dept:

1 CASE NUMBER:

2 PETITIONER: [REDACTED]

3 CASE NAME: Guardianship of [REDACTED]

4 **Declaration of Petitioner**

5 I, [REDACTED] am the Petitioner in this matter and if I were called to court
6 and were sworn under oath, I would testify to the truth of the facts obtained herein. I make this
7 declaration from my own knowledge and the best that I can remember.

8 1. My full name is [REDACTED] I was born on February [REDACTED], 2004, in
9 [REDACTED] Guatemala. I am sixteen years old.

10 2. My mother is [REDACTED] and my father is [REDACTED]
11 [REDACTED].

12 3. My father left Guatemala and moved to the United States when I was very young. I
13 do not have memories of him from before he left. He moved there to find work. He
14 would call the house every other day to speak to us. My only memories of my father
15 are of a voice on the phone.

16 4. In late November 2008, when I was about four years old, my father was hit by a car
17 and died. My family was completely devastated by my father's death and it affected
18 us a lot both financially and emotionally. It was very strange and upsetting to know
19 that he was so far away and suddenly just gone. I felt really sad because I did not
20 have a father to take care of me.

21 5. My father did not leave any inheritance, and when he died it became very hard for my
22 mother to provide for my siblings and me by herself. We were very poor and it was
23 always a struggle to buy the things we needed. We didn't have enough money for
24 food, for clothes, or for me to continue my education. Sometimes I would go to bed
hungry because my mother could not give me enough to eat.

- 1 6. In order for me to continue going to school and to help provide for the family, I had
2 to start working in the fields. I was thirteen years old. I worked three days a week
3 before or after school and on Saturdays. The work was difficult and it was hard to go
4 to school at the same time but I felt like I had to help support my mother and my
5 family because she could not take care of us by herself.
- 6 7. My father's death affected me a lot emotionally. It made me very sad to see how
7 much my family suffered and because I didn't really know what it was like to have a
8 father. I still feel sad thinking about not growing up with a father, not knowing what
9 it's like, and not having memories of times we spent together. It also made me very
10 sad seeing how much my mother struggled to take care of us. I know she tried and
11 that she wanted the best for us but we were eight children and it was impossible. She
12 could not give us what we needed. I felt very insecure all the time.
- 13 8. Life in Guatemala was very dangerous because of the gangs in Tecpan, where I lived,
14 and everywhere in the country. The gang members forced young boys like me to join
15 their gangs and hurt or killed them if they refused. They hurt and killed a lot of
16 innocent people. I would see them on the streets when I went to school and when I
17 went to work. Sometimes at night, I would hear gunshots and I knew it was the gang
18 members hurting people. I knew it was only a matter of time before they came after
19 me. I was very scared of them.
- 20 9. In March 2020, I left Guatemala. I was stopped by immigration officials in Texas,
21 placed in removal proceedings, and then released to my sister, [REDACTED].
- 22 10. I now live with my sister [REDACTED] and her partner in Los Angeles, California. I have a
23 good relationship with both of them. They are very supportive of me and they want to
24 help me have a better future here in the United States. They have welcomed me into
 their lives here and I feel loved and cared for by them. They make sure I have
 everything that I need.

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11. I will be starting school remotely in August, and I am really excited to for the new year. I really enjoyed school in Guatemala, especially music class, and I want to continue my studies here in the United States. I really enjoyed playing guitar but I could not afford to have one of my own. I want to get my own guitar and learn to play it well.

12. I feel very grateful to be here with my sister but it has been hard to get used to life in the United States, especially with quarantine. I don't speak English and I don't know how things work here. I need my sister because she helps me understand how things work here and she gives me everything that I need. She's helping me enroll in school and has helped me find an immigration attorney. She and her partner give me the financial and emotional support I need to adjust to my new life.

13. I cannot go back to Guatemala because there is no one there who can take care of me. My mother cannot take care of me because she is very poor and there is no way for her to give me things I need to succeed in life. I am also scared to go back because Guatemala is a dangerous place for boys like me. I know that if I return the gangs will try to recruit me and hurt or kill me if I refuse.

14. I really hope that I am allowed to continue living here with my sister because she wants the best for me and wants to take care of me. She encourages me to go to school and study hard so I can have a better life. I want my sister to be my legal guardian.

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SIGNATURE PAGE

I declare under penalty of perjury that the foregoing is true and correct, to the best of my knowledge and ability. Executed on August 10, 2020, at Los Angeles, California.

[Redacted Signature]

CERTIFICATION OF TRANSLATION

I, Daniel Sanchez, declare and say as follows:

I certify that I am competent to render translation in both the English and Spanish languages, that I have translated the oral declaration of [REDACTED] into English to the best of my knowledge and ability from Spanish, and I have reviewed it in Spanish with [REDACTED] who confirmed that he understood and verified the contents thereof prior to signing.

I declare under penalty of perjury that the foregoing is true and correct. Executed on this August 10, 2020 in Los Angeles, California.


Daniel Sanchez

- CONFIDENTIAL -

NOTIFICATION TO COURT OF ADDRESS ON CONSERVATORSHIP/GUARDIANSHIP

CASE NUMBER:	DATE OF HEARING:	DATE LETTERS ISSUED:
CHECK ALL BOXES THAT APPLY: <input type="checkbox"/> ACCOUNTING <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE <input type="checkbox"/> TERMINATION <input type="checkbox"/> LIMITED <input type="checkbox"/> SUCCESSOR <input type="checkbox"/> DEMENTIA <input type="checkbox"/> COMPETING		
<input type="checkbox"/> CONSERVATEE <input checked="" type="checkbox"/> WARD	SOCIAL SECURITY NUMBER: N/A	LANGUAGE: Spanish
NAME: Krista Maria Hamilton Doe	DATE OF BIRTH: 01/10/2005	PHONE NUMBER: 213 987-6543
ADDRESS: 1234 South Main Street	CITY: Los Angeles	STATE: CA ZIP CODE: 20015
ATTORNEY'S NAME: Rebecca Brown	BAR NUMBER: 289167	PHONE NUMBER: 213 385-2977
<input type="checkbox"/> CONSERVATOR <input checked="" type="checkbox"/> GUARDIAN <input type="checkbox"/> RELATIVE <input type="checkbox"/> NON-RELATIVE	SOCIAL SECURITY NUMBER: 123-45-445	LANGUAGE: Spanish
NAME: Jane Doe	DATE OF BIRTH: 05/01/1995	PHONE NUMBER: 213 987-6543
ADDRESS: 1234 South Main Street	CITY: Los Angeles	STATE: CA ZIP CODE: 90015
E-MAIL: N/A	DRIVER'S LICENSE/I.D. NUMBER: N.A	
ATTORNEY'S NAME:	BAR NUMBER:	PHONE NUMBER: ()

RELATIVES OF PROPOSED CONSERVATEE/WARD:		
NAME & RELATIONSHIP John Hamiltons, Father	ADDRESS: Deceased	PHONE NUMBER: ()
NAME & RELATIONSHIP Reyna Doe, Mother	ADDRESS: 1234 South Main Street, Los Angeles, CA 90015	PHONE NUMBER: 213 987-6543
NAME & RELATIONSHIP Margarita Hamilton, Sister	ADDRESS: Guatemala	PHONE NUMBER: ()
NAME & RELATIONSHIP Joshua Hamilton, Brother	ADDRESS: Guatemala	PHONE NUMBER: ()
NAME & RELATIONSHIP Miguel Hamilton, Brother	ADDRESS: Guatemala	PHONE NUMBER: ()
NAME & RELATIONSHIP Jane Doe, Sister	ADDRESS: 1234 South Main Street, Los Angeles, CA 90015	PHONE NUMBER: ()
NAME & RELATIONSHIP	ADDRESS:	PHONE NUMBER: ()

<input type="checkbox"/> OTHER COURT CASES PROPOSED CONSERVATEE/CONSERVATOR/GUARDIAN/WARD INVOLVED IN?	
COURT & TYPE OF CASE:	CASE NUMBER:

1. To be submitted at the time the Petition for Appointment of Conservator/Successor Conservator/Guardian is filed.
2. To be submitted at the time Letters of Conservatorship/Guardianship are presented for issuance.
3. To be submitted with the filing of Accountings.
4. Complete additional sheet for other contacts.

TITLE OF CASE Guardianship of Krista Maria Hamilton Doe	CASE NUMBER
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**PROBATE CASE COVERSHEET AND CERTIFICATE OF
GROUNDS FOR ASSIGNMENT TO DISTRICT**

This form is required for all new probate cases filed in the Los Angeles Superior Court.

Step 1: In the "Type of Action" column below, select one type of action that best describes the nature of this case by checking a box.

Step 2: Across from the "Type of Action" you selected, place an "X" in the column that corresponds to the reason for your choice of district. Note that you may only select from the boxes that are not shaded.

TYPE OF ACTION (check one) ▼	District where one or more parties resides	District where proposed conservatee, person w/o capacity or minor resides nor or proposed conservatee resides	District where petitioner resides	District where decedent resided	Decedent, conservatee or minor not CA resident but property is in district	Principal place of trust administration (Probate Code § 17002)	Other statutory authority (list statute): Or may be filed in Central Dist. per LASC Rule 2.3(b)
Decedent's Estate							
<input type="checkbox"/> Petition – Letters of Administration (Initial) [3069]							
<input type="checkbox"/> Petition – Letters of Special Admin w/Gen Powers (Initial) [3070]							
<input type="checkbox"/> Petition – Letters of Special Admin w/o Gen Powers (Initial) [3071]							
<input type="checkbox"/> Petition – Probate of Lost Will (Initial) [3074]							
<input type="checkbox"/> Petition – Probate of Will (Initial) [3075]							
Conservatorship							
<input type="checkbox"/> Petition – Appoint Conservator of Estate – Attend/Nominate (Initial) [3303] <i>(Note: The proposed conservatee will appear at the hearing and has nominated the proposed conservator.)</i>							
<input type="checkbox"/> Petition – Appoint Conservator of Estate Only (Initial) [3046]							
<input type="checkbox"/> Petition – Appoint Conservator of Person Only (Initial) [3047]							
<input type="checkbox"/> Petition – Appoint Conservator of Person & Estate (Initial) [3048]							
<input type="checkbox"/> Petition – Appoint Ltd Conservator of Person/Person & Estate (Initial) [3198]							
Guardianship							
<input type="checkbox"/> Petition – Appoint Guardian of Estate Only (Initial) [3049]							
<input checked="" type="checkbox"/> Petition – Appoint Guardian of Person Only (Initial) [3051]		✓					
<input type="checkbox"/> Petition – Appoint Guardian of Person & Estate (Initial) [3050]							
Trust							
<input type="checkbox"/> Accounting – Trust (Initial) [3229]							
<input type="checkbox"/> Notice – Initial Trust Filing & Notice to Creditors [3038]							
<input type="checkbox"/> Petition – Special Needs Trust (Initial) [3297]							
<input type="checkbox"/> Petition – Trust/Pursuant Prob Code Sec 17200 (Initial) [3076]							
Minor's Compromise							
<input type="checkbox"/> Petition – Approve Minor's Compromise (Initial) [3058]							
<input type="checkbox"/> Petition – Approve Minor's Compromise (Expedited) [3154]							

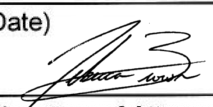
<p style="text-align: center;">TYPE OF ACTION (check one) ▼</p>	District where one or more parties resides	District where proposed conservatee, person w/o capacity or minor resides nor or proposed conservatee resides	District where petitioner resides	District where decedent resided	Decedent, conservatee or minor not CA resident but property is in district	Principal place of trust administration (Probate Code § 17002)	Other statutory authority (list statute): Or may be filed in Central Dist. per LASC Rule 2.3(b)
Other Probate Matters							
Other Probate With At Least One Hearing							
<input type="checkbox"/> Petition – Advance Health Care Directive (Initial) [3044]							
<input type="checkbox"/> Petition – Appoint Successor Custodian/CUTMA (Initial) [3052]							
<input type="checkbox"/> Petition – Authority to Give Medical Consent w/o Conservatorship (Initial) [3059]							
<input type="checkbox"/> Petition – Determine Succession to Real Property (Initial) [3301]							
<input type="checkbox"/> Petition – Establish Fact of: <input type="checkbox"/> Birth [3065], <input type="checkbox"/> Death [3066], or <input type="checkbox"/> Marriage [3067]							
<input type="checkbox"/> Petition – Release of Decedent's Remains (Initial) [3077]							
<input type="checkbox"/> Petition – Spousal/Domestic Partner Property (Initial) [3179]							
<input type="checkbox"/> Petition – Transaction Where Spouse Lacks Capacity (Initial) [3082]							
<input type="checkbox"/> Petition – Tuberculosis Matter [3083]							
<input checked="" type="checkbox"/> Other Probate matter (specify): <u>Special Immigrant Juvenile Status.</u>							
Other Probate With No Hearing							
<input type="checkbox"/> Affidavit – Real Property of Small Value - Prob Code Sec 13200 [3001]							
<input type="checkbox"/> Petition – Order Setting Aside Estate of Small Value (Prob Code Sec 6602) [3292]							
<input type="checkbox"/> Petition – Summary Probate (Public Administrator) [3081]							

Step 3: Select the appropriate district:

Central North (Antelope Valley)

The undersigned hereby certifies that the above entitled matter is properly filed for assignment to the Central District of the Los Angeles Superior Court pursuant to the California Probate Code and Rule 2.3 of this court for the reason checked above. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration was executed on 07/25/2024

(Date)



(Signature of Attorney or Self-Represented Party)

Step 4: Indicate if person filing this petition will require an interpreter:

Yes No

If yes, what language? Spanish

Step 5: The following information is required for the proposed conservatee, ward, trustor or decedent. Please check the appropriate box for the subject of this case:

- Conservatee Trustor Other: _____
 Ward (minor in a guardianship case) Decedent

Does the subject of this Petition require an interpreter?

- Yes No

If yes, what language? Spanish

First Name Krista	Last Name Hamilton Doe	Middle Name Maria	Suffix
A.K.A(s) N/A			
Email Address: N/A			
Cell Phone (For Text Messaging):			
I accept service and notices to be delivered to me by <input type="checkbox"/> Email <input type="checkbox"/> Cell Phone			
Home Address:			
Street 1234 South Main Street			Apt./Suite/Unit #
City Los Angeles		State CA	Zip Code 90015
Mailing Address: <input checked="" type="checkbox"/> same as above			
Street			Apt./Suite/Unit #
City		State	Zip Code
IDENTIFICATION (For Minors)			
Gender: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Date of Birth: (mm/dd/yyyy) 01 / 01 / 2005	

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Rebecca Brown 289167 Public Counsel 610 S Ardmore Ave Los Angeles CA 90005 TELEPHONE NO.: 2133852977 FAX NO. (Optional): 2132014727 E-MAIL ADDRESS (Optional): rbrown@publiccounsel.org ATTORNEY FOR (Name): Krista Maria Hamilton Doe	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse	
GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name): Krista Maria Hamilton Doe	
<input type="checkbox"/> CONSENT OF PROPOSED GUARDIAN <input type="checkbox"/> NOMINATION OF GUARDIAN <input checked="" type="checkbox"/> CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE	CASE NUMBER:

CONSENT OF PROPOSED GUARDIAN

1. I consent to serve as guardian of the person estate of the minor.

Date:

_____ ▶ _____
 (TYPE OR PRINT NAME) (SIGNATURE OF PROPOSED GUARDIAN)

NOMINATION OF GUARDIAN

2. I am a parent of the minor a donor of a gift to the minor. I nominate (name and address):

as guardian of the person estate of the minor.

3. I am a parent of the minor a donor of a gift to the minor. I nominate (name and address):

as guardian of the person estate of the minor.

Date:

_____ ▶ _____
 (TYPE OR PRINT NAME) (SIGNATURE)

NOTICE: The guardian of the person of a minor child has full legal and physical custody until the child becomes an adult or is adopted, the court changes guardians, or the court terminates the guardianship. Parents or other interested persons must petition the court to terminate the guardianship. The court will not do so unless the judge decides that termination would be in the child's best interest.

CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE

4. I consent to appointment of the guardian as requested in the *Petition for Appointment of Guardian of Minor*, filed on (date): 05/26/2024. I am entitled to notice in this proceeding, but I waive notice of hearing of the petition, including notice of any request for independent powers contained in it. I waive timely receipt of a copy of the petition.

07/28/2024	Reyna Doe		Mother
DATE	(TYPE OR PRINT NAME)	(SIGNATURE)	RELATIONSHIP TO MINOR
DATE	(TYPE OR PRINT NAME)	(SIGNATURE)	RELATIONSHIP TO MINOR
DATE	(TYPE OR PRINT NAME)	(SIGNATURE)	RELATIONSHIP TO MINOR

Continued on Attachment 4.

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY: Rebecca Brown 610 S Ardmore Ave Los Angeles CA 90005 2133852977		STATE BAR NUMBER 289167	<i>FOR COURT USE ONLY</i>	
TELEPHONE NO.: 2133852977				
E-MAIL ADDRESS (Optional): rbrown@publiccounsel.org				
ATTORNEY FOR (Name): Krista Maria Hamilton Doe				
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES				
COURTHOUSE ADDRESS: 111 North Hill Street Los Angeles, CA 90012				
MATTER OF: Krista Maria Hamilton Doe				
<input type="checkbox"/> DECEDENT <input type="checkbox"/> CONSERVATEE <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> TRUST/OTHER				
WAIVER OF NOTICE			CASE NUMBER: 898151022	
			HEARING DATE: 08/28/2024	
			DEPT: 9	TIME: 11:00 a.m.

The undersigned hereby waives notice of the hearing on the petition for:

Petition for Special Immigrant Juvenile Findings

(Title of Petition)

filed herein by: **Krista Maria Hamilton Doe**

(Name of Petitioner)

and scheduled to be heard by this court on **08/28/2024**

(Date)

at **11:00 a.m.** in Department **9**.

(Time)

Executed at **Guatemala City, Guatemala**

(City and State)

on **07/28/2024**

(Date)

Reyna Doe

(Signature)

Reyna Doe

(Typed or Printed Name)

Waiver of Notice

1

1 Sara Van Hofwegen (SBN 266985)
Public Counsel
2 610 S. Ardmore Avenue
Los Angeles, CA 90005
3 Tel: (213) 385-2977, ext. 212
Fax: (213) 385-9089
4 Email: SVan@publiccounsel.org

5 Pro Bono Attorney for Petitioner
6 [REDACTED]

7
8 SUPERIOR COURT OF THE STATE OF CALIFORNIA
9 FOR THE COUNTY OF LOS ANGELES
10 CENTRAL BRANCH
11

12 In Re

13 [REDACTED]

14 Petitioner,

CASE NO. [REDACTED]

**DECLARATION OF DUE DILIGENCE
REGARDING SERVICE OF NOTICE OF
HEARING FROM DANIEL SANCHEZ**

HEARING:

Date: [REDACTED]

Time: [REDACTED] pm

Dept.: 2D

Judge: [REDACTED]

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1 I, Daniel Sanchez, declare:

- 2 1. My name is Daniel Sanchez. I am a paralegal at Public Counsel, where I work under the
3 supervision of attorney Sara Van Hofwegen. I have personal knowledge of the facts set
4 forth in this declaration and could completely testify to them if called to do so. I am
5 bilingual in English and Spanish.
- 6 2. Sara Van Hofwegen is the Pro Bono attorney for the Petitioner in this matter.
- 7 3. On behalf of Petitioner, I exercised due diligence in attempting to provide notice of
8 Petitioners' upcoming guardianship hearing to his biological father, [REDACTED]
9 [REDACTED], his paternal grandparents, [REDACTED], and his maternal
10 grandparents, [REDACTED]. However, I was unable to provide
11 notice because Petitioner's biological father, paternal and maternal grandparents are
12 deceased.
- 13 4. On November 23, 2020 at 11:25 AM, I called Petitioner's sister, [REDACTED]
14 [REDACTED], at 323-[REDACTED]. A female answered in Spanish and identified herself as [REDACTED]
15 [REDACTED] the Petitioner's sister. I explained to [REDACTED] that I needed to
16 confirm that Petitioner's biological father, paternal and maternal grandparents were
17 deceased. Both [REDACTED] and Petitioner had informed me previously that Petitioner's
18 biological father, paternal and maternal grandparents were deceased, but I needed to
19 confirm this fact in order to perform due diligence in providing notice. [REDACTED] confirmed
20 that Petitioner's biological father, [REDACTED] [REDACTED] his paternal grandparents,
21 [REDACTED] and [REDACTED] and his maternal grandparents, [REDACTED] and [REDACTED]
22 [REDACTED], were deceased.
- 23 5. I then also asked [REDACTED] if Petitioner was available to confirm that his biological father,
24 [REDACTED] [REDACTED], his paternal grandparents, [REDACTED] and [REDACTED]
25 and his maternal grandparents, [REDACTED] and [REDACTED], were deceased. [REDACTED]
26 said that he was and put him on the phone. A male answered in Spanish and identified
27 himself as [REDACTED] the Petitioner. I explained to [REDACTED] that I needed
28 to confirm that his biological father, his paternal and his maternal grandparents were

1 deceased. [REDACTED] confirmed that, yes, his biological father, [REDACTED] [REDACTED] his
2 paternal grandparents, [REDACTED] and [REDACTED] and his maternal grandparents,
3 [REDACTED] and [REDACTED], were deceased.

4 6. I asked [REDACTED] and Petitioner if they could provide me with contact information for anyone
5 in Guatemala who could confirm that Petitioner's biological father, paternal and maternal
6 grandparents were deceased. [REDACTED] stated that she could give me the contact information
7 for her and Petitioner's sister, [REDACTED]

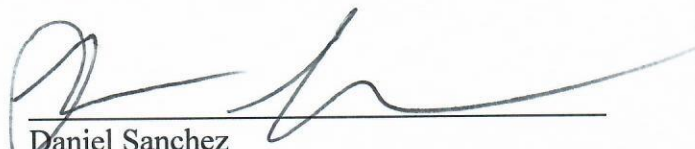
8 7. On November 30, 2020 at 11:16 AM, I called [REDACTED] at [REDACTED]
9 [REDACTED]—the number that [REDACTED] had provided me with. A young woman answered in Spanish
10 and identified herself as [REDACTED] Petitioner's sister. I explained to
11 [REDACTED] that I was attempting to confirm that Petitioner's biological father, [REDACTED] [REDACTED]
12 [REDACTED] Petitioner's paternal grandparents, [REDACTED] and [REDACTED] and
13 Petitioner's maternal grandparents, [REDACTED] and [REDACTED] were deceased.
14 [REDACTED] stated that she could confirm this, and that her and Petitioner's mother, [REDACTED]
15 [REDACTED] was present as well. A female came on the line and identified herself as
16 [REDACTED] I then asked them both if they could confirm that
17 Petitioner's biological father, [REDACTED] [REDACTED] his paternal grandparents, [REDACTED]
18 [REDACTED] and [REDACTED] and his maternal grandparents, [REDACTED] and [REDACTED]
19 [REDACTED] were deceased. [REDACTED] stated that this was correct and [REDACTED]
20 [REDACTED] stated that this was correct.

21 8. On behalf of the Petitioner, I have exercised due diligence in attempting to locate
22 Petitioner's biological father, [REDACTED] [REDACTED] his paternal grandparents, [REDACTED]
23 [REDACTED] and [REDACTED] and his maternal grandparents, [REDACTED] and [REDACTED]
24 [REDACTED]. They could not be located because they are all deceased [REDACTED]

1 I declare under penalty of perjury of the laws of the State of California that the information above is
2 true and correct. This declaration was executed on December 3, 2020 in Los Angeles, California.

3 Dated: 12/3/20

4 Respectfully Submitted,

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6 _____
7 Daniel Sanchez

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GUARDIAN OF (Name): Krista Maria Hamilton Doe	CASE NUMBER: 898151022
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- e. Medical treatment** - As guardian, you are responsible for meeting the medical needs of the child. In most cases, you have the authority to consent to the child's medical treatment. However, if the child is 14 years or older, surgery may not be performed on the child unless either (1) both the child and the guardian consent or (2) a court order is obtained that specifically authorizes the surgery. This holds true except in emergencies. A guardian may not place a child involuntarily in a mental health treatment facility under a probate guardianship. A mental health conservatorship proceeding is required for such an involuntary commitment. However, the guardian may secure counseling and other necessary mental health services for the child. The law also allows older and more mature children to consent to their own treatment in certain situations such as outpatient mental health treatment, medical care related to pregnancy or sexually transmitted diseases, and drug and alcohol treatment.
- f. Community resources** - There are agencies in each county that may be helpful in meeting the specific needs of children who come from conflicted, troubled, or deprived environments. If the child has special needs, you must strive to meet those needs or secure appropriate services.
- g. Financial support** - Even when the child has a guardian, the parents are still obligated to financially support the child. The guardian may take action to obtain child support. The child may also be eligible for Temporary Aid for Needy Families, TANF (formerly known as AFDC), social security benefits, Veterans Administration benefits, Indian child welfare benefits, and other public or private funds.
- h. Visitation** - The court may require that you allow visitation or contact between the child and his or her parents. The child's needs often require that the parent-child relationship be maintained, within reason. However, the court may place restrictions on the visits, such as the requirement of supervision. The court may also impose other conditions in the child's best interest.
- i. Driver's license** - As guardian of the person, you have the authority to consent to the minor's application for a driver's license. If you consent, you will become liable for any civil damages that may result if the minor causes an accident. The law requires that anyone signing the DMV application obtain insurance to cover the minor.
- j. Enlistment in the armed services** - The guardian may consent to a minor's enlistment in the armed services. If the minor enters into active duty with the armed forces, the minor becomes emancipated under California law.
- k. Marriage** - For the minor to marry, the guardian **and the court** must give permission. If the minor enters a valid marriage, the minor becomes emancipated under California law.
- l. Change of address** - A guardian must notify the court in writing of any change in the address of either the child or the guardian. This includes any changes that result from the child's leaving the guardian's home or returning to the parent's home. You **must** always obtain **court permission** before you move the child to another state or country.
- m. Court visitors and status reports** - Some counties have a program in which "court visitors" track and review guardianships. If your county has such a program, you will be expected to cooperate with all requests of the court visitor. As guardian, you may also be required to fill out and file status reports. In all counties, you must cooperate with the court and court investigators.
- n. Misconduct of the child** - A guardian, like a parent, is liable for the harm and damages caused by the willful misconduct of a child. There are special rules concerning harm caused by the use of a firearm. If you are concerned about your possible liability, you should consult an attorney.
- o. Additional responsibilities** - The court may place other conditions on the guardianship or additional duties upon you, as guardian. For example, the court may require the guardian to complete counseling or parenting classes, to obtain specific services for the child, or to follow a scheduled visitation plan between the child and the child's parents or relatives. As guardian, you must follow all court orders.

(Continued on page three)

GUARDIAN OF (Name): Krista Maria Hamilton Doe	CASE NUMBER: 898151022
MINOR	

- p. **Termination of guardianship of the person** - A guardianship of the person automatically ends when the child reaches the age of 18, is adopted, marries, is emancipated by court order, enters into active military duty, or dies. If none of these events has occurred, the child, a parent, or the guardian may petition the court for termination of guardianship. But it must be shown that the guardianship is no longer necessary or that termination of the guardianship is in the child's best interest.

2. GUARDIANSHIP OF THE ESTATE

If the court appoints you as *guardian of the child's estate*, you will have additional duties and obligations. The money and other assets of the child are called the child's "estate." Appointment as guardian of a child's estate is taken very seriously by the court. The guardian of the estate is required to manage the child's funds, collect and make an inventory of the assets, keep accurate financial records, and regularly file financial accountings with the court.

MANAGING THE ESTATE

- a. **Prudent investments** - As guardian of the estate, you must manage the child's assets with the care of a prudent person dealing with someone else's property. This means that you must be cautious and may not make speculative or risky investments.
- b. **Keeping estate assets separate** - As guardian of the estate, you must keep the money and property of the child's estate separate from everyone else's, including your own. When you open a bank account for the estate, the account name must indicate that it is a *guardianship* account and not your personal account. You should use the child's social security number when opening estate accounts. You should never deposit estate funds in your personal account or otherwise mix them with your own funds or anyone else's funds, even for brief periods. Securities in the estate must be held in a name that shows that they are estate property and not your personal property.
- c. **Interest-bearing accounts and other investments** - Except for checking accounts intended for ordinary expenses, you should place estate funds in interest-bearing accounts. You may deposit estate funds in insured accounts in federally insured financial institutions, but you should not put more than \$100,000 in any single institution. You should consult with an attorney before making other kinds of investments.
- d. **Blocked accounts** - A *blocked account* is an account with a financial institution in which money is placed. No person may withdraw funds from a blocked account without the court's permission. Depending on the amount and character of the child's property, the guardian may elect **or the court may require** that estate assets be placed in a blocked account. As guardian of the estate, you must follow the directions of the court and the procedures required to deposit funds in this type of account. The use of a blocked account is a safeguard and may save the estate the cost of a bond.
- e. **Other restrictions** - As guardian of the estate, you will have many other restrictions on your authority to deal with estate assets. Without prior court order, you **may not** pay fees to yourself or your attorney. You may not make a gift of estate assets to anyone. You may not borrow money from the estate. As guardian, you may not use estate funds to purchase real property without a prior court order. If you do not obtain the court's permission to spend estate funds, you may be compelled to reimburse the estate from your own personal funds and may be removed as guardian. You should consult with an attorney concerning the legal requirements relating to sales, leases, mortgages, and investment of estate property. If the child of whose estate you are the guardian has a living parent or if that child receives assets or is entitled to support from another source, you must obtain court approval before using guardianship assets for the child's support, maintenance, or education. You must file a petition or include a request for approval in the original petition, and set forth which exceptional circumstances justify any use of guardianship assets for the child's support. The court will ordinarily grant such a petition for only a limited period of time, usually not to exceed one year, and only for specific and limited purposes.

INVENTORY OF ESTATE PROPERTY

- f. **Locate the estate's property** - As guardian of the estate, you must locate, take possession of, and protect the child's income and assets that will be administered in the estate. You must change the ownership of all assets into the guardianship estate's name. For real estate, you should record a copy of your *Letters of Guardianship* with the county recorder in each county where the child owns real property.

(Continued on reverse)

GUARDIAN OF (Name): Krista Maria Hamilton Doe	CASE NUMBER: 898151022
MINOR	

- g. Determine the value of the property** - As guardian of the estate, you must arrange to have a court-appointed referee determine the value of the estate property unless the appointment is waived by the court. You—not the referee—must determine the value of certain "cash items." An attorney can advise you about how to do this.
- h. File an inventory and appraisal** - As guardian of the estate, you must file an inventory and appraisal within 90 days after your appointment. You may be required to return to court 90 days after your appointment as guardian of the estate to ensure that you have properly filed the inventory and appraisal.

INSURANCE

- i. Insurance coverage** - As guardian of the estate, you should make sure that there is appropriate and sufficient insurance covering the assets and risks of the estate. You should maintain the insurance in force throughout the entire period of the guardianship or until the insured asset is sold.

RECORD KEEPING AND ACCOUNTING

- j. Records** - As guardian of the estate, you must keep complete, accurate records of each financial transaction affecting the estate. The checkbook for the guardianship checking account is essential for keeping records of income and expenditures. You should also keep receipts for all purchases. Record keeping is critical because you will have to prepare an accounting of all money and property that you have received, what you have spent, the date of each transaction, and its purpose. You will also have to be able to describe in detail what is left after you have paid the estate's expenses.
- k. Accountings** - As guardian of the estate, you must file a petition requesting that the court review and approve your accounting one year after your appointment and at least every two years after that. The court may ask that you justify some or all expenditures. You should have receipts and other documents available for the court's review, if requested. If you do not file your accounting as required, the court will order you to do so. You may be removed as guardian for failure to file an accounting.
- l. Format** - As guardian of the estate, you must comply with all state and local rules when filing your accounting. A particular format is specified in the Probate Code, which you must follow when you present your account to the court. You should check local rules for any special local requirements.
- m. Legal advice** - An attorney can advise you and help you prepare your inventories, accountings, and petitions to the court. If you have questions, you should consult with an attorney.

3. OTHER GENERAL INFORMATION

- a. Removal of a guardian** - A guardian may be removed for specific reasons or when it is in the child's best interest. A guardian may be removed either on the court's own motion or by a petition filed by the child, a relative of the child, or any other interested person. If necessary, the court may appoint a successor guardian, or the court may return the child to a parent if that is found to be in the child's best interest.
- b. Legal documents** - For your appointment as guardian to be valid, the *Order Appointing Guardian of Minor* must be signed. Once the court signs the order, the guardian **must** go to the clerk's office, where *Letters of Guardianship* will be issued. *Letters of Guardianship* is a legal document that provides proof that you have been appointed and are serving as the guardian of a minor. You should obtain several certified copies of the *Letters* from the clerk. These legal documents will be of assistance to you in the performance of your duties, such as enrolling the child in school, obtaining medical care, and taking care of estate business.
- c. Attorneys and legal resources** - If you have an attorney, the attorney will advise you on your duties and responsibilities, the limits of your authority, the rights of the child, and your dealings with the court. **If you have legal questions, you should consult with your attorney.** Please remember that the court staff cannot give you legal advice.

(Continued on page five)

GUARDIAN OF (Name): Krista Maria Hamilton Doe	CASE NUMBER: 898151022
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MINOR

If you are not represented by an attorney, you may obtain answers to your questions by contacting community resources, private publications, or your local law library.

NOTICE: This statement of duties is a summary and is not a complete statement of the law. Your conduct as a probate guardian is governed by the law itself and not by this summary.

ACKNOWLEDGMENT OF RECEIPT

1. I have petitioned the court to be appointed as a guardian.
2. I acknowledge that I have received a copy of this statement of the duties of the position of guardian.

Date: 07/28/2024

Jane Doe _____
 (TYPE OR PRINT NAME)

 _____
 (SIGNATURE OF PETITIONER)

Date: _____

 (TYPE OR PRINT NAME)

 _____
 (SIGNATURE OF PETITIONER)

Date: _____

 (TYPE OR PRINT NAME)

 _____
 (SIGNATURE OF PETITIONER)

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NO.: 289167 NAME: Rebecca Brown FIRM NAME: Public Counsel STREET ADDRESS: 610 S Ardmore Ave CITY: Los Angeles STATE: CA ZIP CODE: 90005 TELEPHONE NO.: 2133852977 FAX NO.: 2132014727 E-MAIL ADDRESS: rbrown@publiccounsel.org ATTORNEY FOR (name): Krista Maria Hamilton Doe	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse	
GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name): Krista Maria Hamilton Doe	
ORDER APPOINTING GUARDIAN OR EXTENDING GUARDIANSHIP OF THE PERSON	CASE NUMBER: 898151022
WARNING: THIS APPOINTMENT IS NOT EFFECTIVE UNTIL LETTERS HAVE ISSUED.	

1. The petition for appointment of a guardian or extension of a guardianship of the person came on for hearing as follows (check boxes c, d, and e to indicate personal presence):
 - a. Judge (name): **Hon. Wendy Wilcox**
 - b. Hearing date: **08/28/2024** Time: **11:00 a.m.** Dept.: **9** Room:
 - c. Petitioner (name): **Krista Maria Hamilton Doe**
 - d. Attorney for Petitioner (name): **Rebecca Brown**
 - e. Attorney for (proposed) ward (name, address, e-mail, and telephone):
Rebecca Brown, Public Counsel, 610 S Ardmore Ave., Los Angeles, CA 90005, rbrown@publiccounsel.org, 213-385-2977

THE COURT FINDS

2. a. All notices required by law have been given.
 b. Notice of hearing to the following persons has been should be dispensed with (names):
3. Appointment of a guardian of the person estate of the proposed ward is necessary or convenient. (NOTE: The Probate Code does not authorize the appointment of a guardian of the estate for a proposed ward 18 years of age or older.)
4. Extension of the guardianship of the person past the ward's 18th birthday is necessary or convenient.
5. Granting the guardian powers to be exercised independently under Probate Code section 2590 is to the advantage and benefit and is in the best interest of the guardianship estate.
6. Attorney (name): _____ has been appointed by the court as legal counsel to represent the (proposed) ward in these proceedings. The cost for representation is: \$
7. The appointed court investigator, probation officer, or domestic relations investigator is (name, title, address, and telephone):

Do NOT use this form for a temporary guardianship.

GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name): Krista Maria Hamilton Doe	CASE NUMBER: 898151022
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THE COURT ORDERS

8. a. (name): Jane Does
(address): 1234 South Main Street
Los Angeles, CA 90015
(telephone): 213 987-6543

is appointed guardian of the PERSON of (name): Krista Maria Hamilton Doe and Letters shall issue upon qualification.

- b. (Not applicable to a proposed ward 18 years of age or older.)
 (name):
(address): (telephone):

is appointed guardian of the ESTATE of (name):
and Letters shall issue upon qualification.

- c. The appointment of
(name):
(address): (telephone):

as guardian of the PERSON of (name):
is extended past the ward's 18th birthday and new Letters shall issue forthwith.

9. Notice of hearing to the persons named in item 2b is dispensed with.

10. a. Bond is not required.
b. Bond is fixed at: \$ to be furnished by an authorized surety company or as otherwise provided by law.
c. Deposits of: \$ are ordered to be placed in a blocked account at (specify institution and location):

and receipts shall be filed. No withdrawals shall be made without a court order.

Additional orders in Attachment 10c.

- d. The guardian is not authorized to take possession of money or any other property without a specific court order.
11. For legal services rendered on behalf of the (proposed) ward, the parents of the (proposed) ward
 the (proposed) ward's estate shall pay to (name):
the sum of: \$
 forthwith as follows (specify terms, including any combination of payers):

12. The guardian of the estate is granted authorization under Probate Code section 2590 to exercise independently the powers specified in Attachment 12 subject to the conditions provided.
13. Orders are granted relating to the powers and duties of the guardian of the person under Probate Code sections 2351–2358 as specified in Attachment 13.

GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name): Krista Maria Hamilton Doe	CASE NUMBER: 898151022
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14. Orders are granted relating to the conditions imposed under Probate Code section 2402 upon the guardian of the estate as specified in Attachment 14.

15. Other orders as specified in Attachment 15 are granted.

16. The probate referee appointed is (name and address):

17. Number of boxes checked in items 9–16: _____

18. Number of pages attached: _____

Date:

JUDGE OF THE SUPERIOR COURT

SIGNATURE FOLLOWS LAST ATTACHMENT

PARTY WITHOUT ATTORNEY OR ATTORNEY STATE BAR NO.: 289167 NAME: Rebecca Brown FIRM NAME: Public Counsel STREET ADDRESS: 610 S Ardmore Ave CITY: Los Angeles STATE: CA ZIP CODE: 90005 TELEPHONE NO.: 2133852977 FAX NO.: 2132014727 E-MAIL ADDRESS: rbrown@publiccounsel.org ATTORNEY FOR (name): Krista Maria Hamilton Doe	FOR COURT USE ONLY CONFIDENTIAL
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse	
CASE NAME: Guardianship of Krista Maria Hamilton Doe	
SPECIAL IMMIGRANT JUVENILE FINDINGS	CASE NUMBER: 898151022

1. Child's name: **Krista Maria Hamilton Doe** Date of birth: **01/01/2005**
2. The petition or request for Special Immigrant Juvenile (SIJ) findings was heard
 - a. Date of hearing: **08/28/2024** Time: **11:00 a.m.** Dept.: **9** Room:
 - b. Judicial officer (name): **Hon. Wendy Wilcox**
 - c. Persons and attorneys present (names):
Krista Maria Hamilton Doe (ward); Jane Doe (guardian); Rebecca Brown (attorney for petitioner-ward).

The court has reviewed the evidence and finds the following:

3. Notice of the underlying proceeding was given as required by law.
4. a. The child was declared a dependent of the juvenile court of the county of (specify):
 on (date): and remains under the court's jurisdiction.

OR

- b. The child was
 - (1) placed under the custody of an individual (name, unless confidential): **Jane Doe**
 - (2) placed under the custody of an entity (name):
 - (3) committed to a state agency or department (name):
 appointed by this court or another California court on (date): **08/28/2024**
 The custody or commitment order remains in effect.

Supporting legal conclusions or factual findings, if necessary:

Jane Doe was appointed the guardian of Krista Maria Hamilton Doe under section 1510.1 of the California Probate Code, and as her guardian has "the care, custody control of, and has charge of the education" of Krista pursuant to section 2351(a) of the California Probate Code. It is in Krista's best interest that Ms. Doe her sister, be her legal guardian because the guardianship is necessary and convenient and the guardianship best promotes Krista's health, safety, and welfare. See Cal. Prob. Code § 1514; Cal. Fam. Code § 3011(a). Krista's father is deceased and her mother is in Guatemala. Krista has been residing with Ms. Doe who needs this custodial relationship in order to make medical, educational, housing, and other legal decisions for Krista and so that Krista could benefit from having custodial status with her. Therefore, it was in Krista's best interest under California law that Ms. Doe was appointed her guardian under section 1514 of the California code.

Continued on Attachment 4.

CASE NAME: Guardianship of Krista Maria Hamilton Doe	CASE NUMBER: 898151022
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5. Reunification of the child with the mother the father the other legal parent is not viable under California law because of parental abuse, neglect, abandonment, or a similar legal basis (specify):

as established on (date): 08/28/2024, for the following reasons (for each parent with whom reunification is not viable, state the reasons that apply to that parent):

Krista cannot reunify with her father, John Hamilton due to abandonment. Under the California Family Code, abandonment means that a child has been left without provision for reasonable and necessary care or supervision. See Cal. Fam. Code § 3402(a). Under the California Welfare and Institutions Code, abandonment occurs when a "a child has been left without any provision for support." See Cal. Welt. & Inst. Code § 300(g). Krista's father abandoned her under California law given that he died and failed to provide Krista with any material, emotional, or financial resources. As a result, Krista did not have enough food to eat and was forced to work in the fields. This behavior constitutes leaving Krista without provision for reasonable and necessary care, supervision, or support and is abandonment under section 3402(a) of the California Family Code and section 300(g) of the California Welfare and Institutions Code.

Continued on Attachment 5.

6. It is not in the child's best interest to be returned to the child's or parent's country of nationality or country of last habitual residence (specify country or countries):
for the following reasons:

Pursuant to section 3011 (a) of the California Family Code, it is not in Krista's best interest to return to her native Guatemala because Krista's health, safety, and welfare will be jeopardized there. In Guatemala, Krista suffered from hunger and extreme poverty and was forced to work from a young age. She also faced violence from Guatemala's dangerous gangs. In contrast, it is in Krista's best interest to remain in the United States where she is safe and well-cared for and all her needs are met.

See Cal. Fam. Code § 3011 (a).

Continued on Attachment 6.

Date:

JUDICIAL OFFICER
 SIGNATURE FOLLOWS LAST ATTACHMENT

APPENDIX C:
Sample Forms
AB2090



TITLE OF CASE Guardianship of Krista Maria Hamilton Doe	CASE NUMBER 898151022
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**PROBATE CASE COVERSHEET AND CERTIFICATE OF
GROUNDS FOR ASSIGNMENT TO DISTRICT**

This form is required for all new probate cases filed in the Los Angeles Superior Court.

Step 1: In the "Type of Action" column below, select one type of action that best describes the nature of this case by checking a box.

Step 2: Across from the "Type of Action" you selected, place an "X" in the column that corresponds to the reason for your choice of district. Note that you may only select from the boxes that are not shaded.

TYPE OF ACTION (check one) ▼	District where one or more parties resides	District where proposed conservatee, person w/o capacity or minor resides nor or proposed conservatee resides	District where petitioner resides	District where decedent resided	Decedent, conservatee or minor not CA resident but property is in district	Principal place of trust administration (Probate Code § 17002)	Other statutory authority (list statute): Or may be filed in Central Dist. per LASC Rule 2.3(b)
Decedent's Estate							
<input type="checkbox"/> Petition – Letters of Administration (Initial) [3069]							
<input type="checkbox"/> Petition – Letters of Special Admin w/Gen Powers (Initial) [3070]							
<input type="checkbox"/> Petition – Letters of Special Admin w/o Gen Powers (Initial) [3071]							
<input type="checkbox"/> Petition – Probate of Lost Will (Initial) [3074]							
<input type="checkbox"/> Petition – Probate of Will (Initial) [3075]							
Conservatorship							
<input type="checkbox"/> Petition – Appoint Conservator of Estate – Attend/Nominate (Initial) [3303] <i>(Note: The proposed conservatee will appear at the hearing and has nominated the proposed conservator.)</i>							
<input type="checkbox"/> Petition – Appoint Conservator of Estate Only (Initial) [3046]							
<input type="checkbox"/> Petition – Appoint Conservator of Person Only (Initial) [3047]							
<input type="checkbox"/> Petition – Appoint Conservator of Person & Estate (Initial) [3048]							
<input type="checkbox"/> Petition – Appoint Ltd Conservator of Person/Person & Estate (Initial) [3198]							
Guardianship							
<input type="checkbox"/> Petition – Appoint Guardian of Estate Only (Initial) [3049]							
<input checked="" type="checkbox"/> Petition – Appoint Guardian of Person Only (Initial) [3051]							✓
<input type="checkbox"/> Petition – Appoint Guardian of Person & Estate (Initial) [3050]							
Trust							
<input type="checkbox"/> Accounting – Trust (Initial) [3229]							
<input type="checkbox"/> Notice – Initial Trust Filing & Notice to Creditors [3038]							
<input type="checkbox"/> Petition – Special Needs Trust (Initial) [3297]							
<input type="checkbox"/> Petition – Trust/Pursuant Prob Code Sec 17200 (Initial) [3076]							
Minor's Compromise							
<input type="checkbox"/> Petition – Approve Minor's Compromise (Initial) [3058]							
<input type="checkbox"/> Petition – Approve Minor's Compromise (Expedited) [3154]							

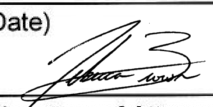
<p style="text-align: center;">TYPE OF ACTION (check one) ▼</p>	District where one or more parties resides	District where proposed conservatee, person w/o capacity or minor resides nor or proposed conservatee resides	District where petitioner resides	District where decedent resided	Decedent, conservatee or minor not CA resident but property is in district	Principal place of trust administration (Probate Code § 17002)	Other statutory authority (list statute): Or may be filed in Central Dist. per LASC Rule 2.3(b)
Other Probate Matters							
Other Probate With At Least One Hearing							
<input type="checkbox"/> Petition – Advance Health Care Directive (Initial) [3044]							
<input type="checkbox"/> Petition – Appoint Successor Custodian/CUTMA (Initial) [3052]							
<input type="checkbox"/> Petition – Authority to Give Medical Consent w/o Conservatorship (Initial) [3059]							
<input type="checkbox"/> Petition – Determine Succession to Real Property (Initial) [3301]							
<input type="checkbox"/> Petition – Establish Fact of: <input type="checkbox"/> Birth [3065], <input type="checkbox"/> Death [3066], or <input type="checkbox"/> Marriage [3067]							
<input type="checkbox"/> Petition – Release of Decedent's Remains (Initial) [3077]							
<input type="checkbox"/> Petition – Spousal/Domestic Partner Property (Initial) [3179]							
<input type="checkbox"/> Petition – Transaction Where Spouse Lacks Capacity (Initial) [3082]							
<input type="checkbox"/> Petition – Tuberculosis Matter [3083]							
<input checked="" type="checkbox"/> Other Probate matter (specify): <u>Special Immigrant Juvenile Status</u>							
Other Probate With No Hearing							
<input type="checkbox"/> Affidavit – Real Property of Small Value - Prob Code Sec 13200 [3001]							
<input type="checkbox"/> Petition – Order Setting Aside Estate of Small Value (Prob Code Sec 6602) [3292]							
<input type="checkbox"/> Petition – Summary Probate (Public Administrator) [3081]							

Step 3: Select the appropriate district:

Central North (Antelope Valley)

The undersigned hereby certifies that the above entitled matter is properly filed for assignment to the Central District of the Los Angeles Superior Court pursuant to the California Probate Code and Rule 2.3 of this court for the reason checked above. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration was executed on 07/25/2024

(Date)



(Signature of Attorney or Self-Represented Party)

Step 4: Indicate if person filing this petition will require an interpreter:

Yes No

If yes, what language? Spanish

Step 5: The following information is required for the proposed conservatee, ward, trustor or decedent. Please check the appropriate box for the subject of this case:

- Conservatee
 Trustor
 Other: _____
 Ward (minor in a guardianship case)
 Decedent

Does the subject of this Petition require an interpreter?

- Yes
 No

If yes, what language? Spanish

First Name Krista	Last Name Hamilton Doe	Middle Name Maria	Suffix
A.K.A(s) N/A			
Email Address: N/A			
Cell Phone (For Text Messaging):			
I accept service and notices to be delivered to me by <input type="checkbox"/> Email <input type="checkbox"/> Cell Phone			
Home Address:			
Street 1234 South Main Street			Apt./Suite/Unit #
City Los Angeles		State CA	Zip Code 90015
Mailing Address: <input checked="" type="checkbox"/> same as above			
Street			Apt./Suite/Unit #
City		State	Zip Code
IDENTIFICATION (For Minors)			
Gender: <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Date of Birth: (mm/dd/yyyy) 01 / 01 / 2005	

- CONFIDENTIAL -

NOTIFICATION TO COURT OF ADDRESS ON CONSERVATORSHIP/GUARDIANSHIP

CASE NUMBER: 898151022		DATE OF HEARING:	DATE LETTERS ISSUED:
CHECK ALL BOXES THAT APPLY: <input type="checkbox"/> ACCOUNTING <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE <input type="checkbox"/> TERMINATION <input type="checkbox"/> LIMITED <input type="checkbox"/> SUCCESSOR <input type="checkbox"/> DEMENTIA <input type="checkbox"/> COMPETING			
<input type="checkbox"/> CONSERVATEE <input checked="" type="checkbox"/> WARD		SOCIAL SECURITY NUMBER: N/A	LANGUAGE: Spanish
NAME: Krista Maria Hamilton Doe		DATE OF BIRTH: 01/10/2005	PHONE NUMBER: 213 987-6543
ADDRESS: 1234 South Main Street		CITY: Los Angeles	STATE: CA ZIP CODE: 20015
ATTORNEY'S NAME: Rebecca Brown		BAR NUMBER: 289167	PHONE NUMBER: 213 385-2977
<input type="checkbox"/> CONSERVATOR <input checked="" type="checkbox"/> GUARDIAN <input type="checkbox"/> RELATIVE <input type="checkbox"/> NON-RELATIVE		SOCIAL SECURITY NUMBER: 123-45-445	LANGUAGE: Spanish
NAME: Jane Doe		DATE OF BIRTH: 05/01/1995	PHONE NUMBER: 213 987-6543
ADDRESS: 1234 South Main Street		CITY: Los Angeles	STATE: CA ZIP CODE: 90015
E-MAIL: N/A		DRIVER'S LICENSE/I.D. NUMBER: N.A	
ATTORNEY'S NAME:		BAR NUMBER:	PHONE NUMBER: ()

RELATIVES OF PROPOSED CONSERVATEE/WARD:		
NAME & RELATIONSHIP John Hamiltons, Father	ADDRESS: Deceased	PHONE NUMBER: ()
NAME & RELATIONSHIP Reyna Doe, Mother	ADDRESS: 1234 South Main Street, Los Angeles, CA 90015	PHONE NUMBER: 213 987-6543
NAME & RELATIONSHIP Margarita Hamilton, Sister	ADDRESS: Guatemala	PHONE NUMBER: ()
NAME & RELATIONSHIP Joshua Hamilton, Brother	ADDRESS: Guatemala	PHONE NUMBER: ()
NAME & RELATIONSHIP Miguel Hamilton, Brother	ADDRESS: Guatemala	PHONE NUMBER: ()
NAME & RELATIONSHIP Jane Doe, Sister	ADDRESS: 1234 South Main Street, Los Angeles, CA 90015	PHONE NUMBER: ()
NAME & RELATIONSHIP	ADDRESS:	PHONE NUMBER: ()

<input type="checkbox"/> OTHER COURT CASES PROPOSED CONSERVATEE/CONSERVATOR/GUARDIAN/WARD INVOLVED IN?	
COURT & TYPE OF CASE:	CASE NUMBER:

1. To be submitted at the time the Petition for Appointment of Conservator/Successor Conservator/Guardian is filed.
2. To be submitted at the time Letters of Conservatorship/Guardianship are presented for issuance.
3. To be submitted with the filing of Accountings.
4. Complete additional sheet for other contacts.

This form must be used by a guardian or conservator, or by a petitioner for the appointment of a guardian or conservator, to request a waiver of court fees in the guardianship or conservatorship court proceeding or in any other civil action in which the guardian or conservator represents the interests of the ward or conservatee as a plaintiff or defendant.

If the ward or conservatee (including a proposed ward or conservatee if a petition for appointment of a guardian or conservator has been filed but has not yet been decided by the court) directly receives public benefits or is supported by public benefits received by another for their support, is a low-income person, or does not have enough income to pay for their household's basic needs and the court fees, you may use this form to ask the court to waive the court fees. The court may order you to answer questions about the finances of the ward or conservatee. If the court waives the fees, the ward or conservatee, their estate, or someone with a duty to support the ward or conservatee, may still have to pay later if:

- You cannot give the court proof of the ward's or conservatee's eligibility,
- The ward's or conservatee's financial situation improves during this case, or
- You settle the civil case on behalf of the ward or conservatee for **\$10,000** or more. The trial court that waives fees will have a lien on any such settlement in the amount of the waived fees and costs. The court may also charge the ward or conservatee, or their estate, any collection costs.

Clerk stamps date here when form is filed.

Fill in court name and street address:

Superior Court of California, County of
Los Angeles
Stanley Mosk Courthouse
111 North Hill Street
Los Angeles CA 90012

Fill in case number and name:

Case Number:

Case Name:
Guardianship of Krista Maria Hamilton
Doe

1 Your Information (guardian or conservator, or person asking the court to appoint a guardian or conservator):

Name: Krista Maria Hamilton Doe

Phone: 2139876543

Street or mailing address: 1234 South Main Street

City: Los Angeles

State: CA

Zip: 90015

2 Your Lawyer (if you have one): Name: Rebecca Brown

Firm or Affiliation: Public Counsel

State Bar No.: 289167

Address: 610 S Ardmore Ave

Phone: 2133852977

City: Los Angeles

State: CA

Zip: 90005

Email: rbrown@publiccounsel.org

a. The lawyer has agreed to advance all or a portion of court fees or costs (check one): Yes No

b. (If yes, your lawyer must sign here.) Lawyer's signature: _____

If your lawyer is not providing legal-aid type services based on your or the ward's or conservatee's low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.

3 Ward's or Conservatee's Information (file a separate Request for each ward in a multiward case):

Name: Krista Maria Hamilton Doe

Age and date of birth (ward only):

Street or mailing address: 1234 South Main Street

19 years old , 01/01/2005

City: Los Angeles

State: CA

Zip: 90015

Phone: 2139876543

4 Ward's or Conservatee's Lawyer, if any: Name: Rebecca Brown

Firm or Affiliation: Public Counsel

State Bar No.: 289167

Address: 610 S Ardmore Ave

Phone: 2133852977

City: Los Angeles

State: CA

Zip: 90005

Email: rbrown@publiccounsel.org

5 Ward or Conservatee's Job (job title; if not employed, so state): Butcher shop clerk

Name of employer: Happy Pig

Employer's address: 789 West Ave. Los Angeles

State: CA Zip: 90006



Name of (Proposed) Ward or Conservatee:

Krista Maria Hamilton Doe

Case Number:

6 What court's fees or costs are you asking to be waived?

- Superior Court (See Information Sheet on Waiver of Superior Court Fees and Costs (form FW-001-INFO).)
Supreme Court, Court of Appeal, or Appellate Division of Superior Court (See Information Sheet on Waiver of Appellate Court Fees (form APP-015/FW-015-INFO).)

7 Check here if you asked the court to waive court fees for this case in the last six months. (If your previous request is reasonably available, please attach it to this form and check here):

8 Why are you asking the court to waive the ward's or conservatee's court fees?

- The ward or one or both of the ward's parents, or the conservatee or the conservatee's spouse or registered domestic partner, receive (check all that apply):
Supplemental Security Income (SSI) State Supplemental Payment (SSP) SNAP (Food Stamps)
IHSS (In-Home Supportive Services) CalWORKS or Tribal TANF Medi-Cal
County Relief/General Assistance CAPI (Cash Assistance Program for Aged, Blind, and Disabled)
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program)
Unemployment Compensation

(Names and relationships to ward or conservatee of persons who receive the public benefits listed above):

b. The gross monthly income of the ward's or conservatee's household (before deductions for taxes) is less than the amount listed below. (If you check 8b, you must fill out items 14, 15, and 16 on page 4 of this form.)*

Table with 6 columns: Family Size, Family Income, Family Size, Family Income, Family Size, Family Income. Rows show income levels for family sizes 1-6.

c. The ward's or conservatee's household does not have enough income to pay for its basic needs and the court fees. I ask the court to (check one, and you must fill out items 14, 15, 16, 17, and 18 on page 4):*

- (1) Waive all court fees and costs. (2) Waive some court fees and costs.
(3) Let the (proposed) guardian or conservator, on behalf of the (proposed) ward or conservatee, make payments over time.

* (Do not include income of guardian or conservator living in the household in 8b or 8c or count them in family size in 8b. unless they are a parent of the ward or the spouse or registered domestic partner of the conservatee.)

Guardians or petitioners for their appointment must complete items 9 and 10.

9 Ward's Estate: Person only, no estate. Inventory or petition estimated value:

Source (e.g., gift, inheritance, settlement, judgment, insurance): Est. collection date:

10 Ward's Parents' Information:

a. Name of ward's parent: Unknown Deceased (date of death):

Street or mailing address: Unknown

City: State: Zip:

Phone:

b. Name of ward's parent: Jane Doe Deceased (date of death):

Street or mailing address: 1234 South Main Street

City: Los Angeles State: CA Zip: 90015

Phone: 2139876543

c. Ward's parents are (check all that apply): married living together separated divorced

Support order for ward? No Yes Payable to (name):

Payor (name):

Court: Case Number:

Date of order (if multiple, date of latest): Monthly amount:



Name of (Proposed) Ward or Conservatee:

Krista Maria Hamilton Doe

Case Number:

Conservators or petitioners for their appointment must complete items 11–13.

11 Conservatee's Estate: Person only, no estate.

Inventory or petition estimated value:

Est. collection date:

12 Conservatee's Spouse's or Registered Domestic Partner's Information:

Name of conservatee's spouse or registered domestic partner: _____ Spouse Partner

Date of marriage or partnership: _____ Deceased (date of death): _____

Street or mailing address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Name of employer (if none, so state): _____

Employer's address: _____ State: _____ Zip: _____

The conservatee's spouse or partner is is not managing, or following appointment of a conservator is planning to manage, some or all of the couple's community property outside the conservatorship estate.

If you selected "is" above: The income, money, and property shown on page 4 includes does not include the income and property managed, or expected to be managed, by the spouse/partner outside the estate.

Divorced (date of final judgment or decree): _____

Court: _____

Case Number: _____ Support order for conservatee? No Yes

Date of support order (if multiple, date of latest): _____ Monthly amount: _____

13 The Conservatee and Trusts:

The conservatee:

a. is is not a trustor or settlor of a trust.

b. is is not a beneficiary of a trust.

If you selected "Is" to complete any of the above statements, identify and provide, in an attachment to this Request, the current address and telephone number of the current trustee(s) of each trust, describe the general terms of and value of each trust and the nature and value of the conservatee's interest in each trust, and the amount(s) and frequency of any distributions to or for the benefit of the conservatee prior to your appointment as conservator of which you are aware. (You may use Judicial Council form MC-025 for this purpose.)

All applicants who checked item 8b or item 8c on page 2 must continue to and follow the instructions for completion of items 14–16 or items 14–18 on page 4, before signing below.

The information I have provided on this form and all attachments about the (proposed) ward or conservatee is true and correct to the best of my information and belief. The information I have provided on this form and all attachments concerning myself is true and correct. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: 07/26/2024

Krista Maria Hamilton Doe
Print your name here


Sign here



Name of (Proposed) Ward or Conservatee:

Case Number:

Krista Maria Hamilton Doe

If you checked 8a on page 2, do not fill out below. If you checked 8b, you must answer questions 14–16. If you checked 8c, you must answer questions 14–18. If you need more space, attach form MC-025 or attach a sheet of paper, and write "Financial Information" and the ward's or conservatee's name and case number at the top.

14 Check here if the ward's or conservatee's income changes a lot from month to month. If it does, complete the form based on their average income for the past 12 months.

15 Ward's or Conservatee's Gross Monthly Income

a. List the source and amount of any income the ward or conservatee gets each month, including: wages or other income from work before deductions, spousal/child support, retirement, social security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income, reimbursement for job-related expenses, gambling or lottery winnings, etc.

- (1) Krista Maria Hamilton Doe \$ 1100.00
(2) \$
(3) \$
(4) \$
(5) \$

b. Total monthly income: \$ 1100.00

16 Ward's or Conservatee's Household's Income

a. List the income of all other persons living in the ward's or conservatee's home who depend in whole or in part on them for support, or on whom they depend in whole or in part for support.

Table with columns: Name, Age, Relationship, Gross Monthly Income. Rows 1-10.

b. Total monthly income of persons above: \$

Total monthly income and household income (15b plus 16b): \$ 1100.00

17 Ward's or Conservatee's Household's Money and Property

a. Cash \$

b. All financial accounts (list bank name and amount):

- (1) \$
(2) \$
(3) \$

c. Cars, boats, and other vehicles

Table with columns: Make / Year, Fair Market Value, How Much You Still Owe. Rows 1-3.

d. Real estate Address Fair Market Value How Much You Still Owe

- (1) \$
(2) \$

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.):

Table with columns: Describe, Fair Market Value, How Much You Still Owe. Rows 1-2.

18 Ward's or Conservatee's Household's Monthly Deductions and Expenses

a. List any payroll deductions and the monthly amount below:

- (1) \$
(2) \$
(3) \$
(4) \$

b. Rent or house payment and maintenance \$

c. Food and household supplies \$

d. Utilities and telephone \$

e. Clothing \$

f. Laundry and cleaning \$

g. Medical and dental expenses \$

h. Insurance (life, health, accident, etc.) \$

i. School, child care \$

j. Child, spousal support (another marriage) \$

k. Transportation, gas, auto repair and insurance \$

l. Installment payments (list each below):

- Paid to: (1) \$ (2) \$ (3) \$

m. Wages/earnings withheld by court order \$

n. Any other monthly expenses (list each below).

- Paid to: How Much? (1) \$ (2) \$ (3) \$

Total monthly expenses (add 18a – 18n above): \$

To list any other facts you want the court to know, such as the (proposed) ward's or conservatee's unusual medical expenses, etc, attach form MC-025 or attach a sheet of paper and write "Financial Information" and the (proposed) ward's or conservatee's name and case number at the top.

Check here if you attach another page. []

Important! If the ward's or conservatee's financial situation or ability to pay court fees improves, you must notify the court within five days on form FW-010-GC.

Do not include income of guardian or conservator living in the household in item 16, their money and property in item 17, or their deductions and expenses in item 18 unless they are a parent of the ward or the spouse or registered domestic partner of the conservatee.

Clerk stamps date here when form is filed.

1 (Proposed) guardian or conservator who asked the court to waive court fees for (proposed) ward or conservatee:Name: Krista Maria Hamilton DoeStreet or mailing address: 1234 South Main StreetCity: Los Angeles State: CA Zip: 90015Telephone: 2139876543**2 Lawyer, if person in 1 has one:**Name: Rebecca Brown State Bar No: 289167Firm or Affiliation: Public CounselStreet or mailing address: 610 S Ardmore AveCity: Los Angeles State: CA Zip: 90005E-mail: rbrown@publiccounsel.org Telephone: 2133852977**3 (Proposed) ward or conservatee:**Name: Krista Maria Hamilton DoeStreet or mailing address: 1234 South Main StreetCity: Los Angeles State: CA Zip: 90045Telephone: 2139876543**4 Lawyer for (proposed) ward or conservatee, if any:**Name: Rebecca Brown State Bar No: 289167Firm or Affiliation: Public CounselStreet or mailing address: 610 S Ardmore AveCity: Los Angeles State: CA Zip: 90005E-mail: rbrown@publiccounsel.org Telephone: 2133852977**5 A request to waive court fees was filed on (date):** The court made a previous fee waiver order in this case on (date):

Fill in court name and street address:

**Superior Court of California, County of
Los Angeles
Stanley Mosk Courthouse
111 North Hill Street
Los Angeles CA 90012**

Fill in case number and name:

Case Number:**Case Name:**

Guardianship of Krista Maria Hamilton Doe

Read this form carefully. All checked boxes are court orders.

Notice: The court may order you to answer questions about the ward's or conservatee's finances after granting a waiver and may later order payment of the waived fees from his or her estate. If this happens and the fees are not paid, the court can also charge collection fees. The court may also direct you to make efforts to collect money to pay back waived fees from persons who owe a duty to support the ward or conservatee. If there is a change in the ward's or conservatee's financial circumstances during this case that increases his or her ability to pay fees and costs, you must notify the trial court within five days. (Use form FW-010-GC.)

If this case is an action against another party and you win the case on behalf of the ward or conservatee, the trial court may order the other side to pay some or all of the waived fees. If you settle the matter for **\$10,000** or more, the trial court will have a lien on the settlement in the amount of the waived fees. The trial court may not dismiss the case until the lien is paid.

The court may also have a lien against the ward's or conservatee's estate that must be paid before the estate is distributed, the guardianship or conservatorship proceeding is concluded, and you are discharged as guardian or conservator.

**6 After reviewing your: Request to Waive Court Fees Request to Waive Additional Court Fees
the court makes the following orders:**a. The court **grants** your request concerning the ward's or conservatee's court fees and costs, as follows:(1) **Fee Waiver.** The court grants your request and waives the fees and costs listed below.*(Cal. Rules of Court, rules 3.55 and 8.818.) You do not have to pay the court fees for the following:*

- Filing papers in superior court
- Making copies and certifying copies
- Sheriff's fee to give notice
- Court fee for phone hearing
- Giving notice and certificates
- Sending papers to another court department

(List continued on next page.)

Name of (Proposed) Ward or Conservatee:

Case Number:

Krista Maria Hamilton Doe

- 6 a. (1)
 - Reporter’s fee for attendance at hearing or trial, if you request that the court provide an official reporter
 - Assessment for court investigations under Probate Code section 1513, 1826, or 1851
 - Preparing, certifying, copying, and sending the clerk’s transcript on appeal
 - Holding in trust the deposit for a reporter’s transcript on appeal under rule 8.130 or 8.834
 - Making a transcript or copy of an official electronic recording under rule 8.835

(2) **Additional Fee Waiver.** The court grants your request and waives the additional superior court fees and costs that are checked below. (*Cal. Rules of Court, rule 3.56.*) You do not have to pay for the checked items.

- | | |
|---|---|
| <input type="checkbox"/> Jury fees and expenses | <input type="checkbox"/> Fees for a peace officer to testify in court |
| <input type="checkbox"/> Fees for court-appointed experts | <input type="checkbox"/> Court-appointed interpreter fees for a witness |
| <input type="checkbox"/> Other (<i>specify</i>): _____ | |

b. The court **denies** your fee waiver request, as follows:

Warning! If you miss the deadline below, the court cannot process your request for hearing or the court papers you filed with your original request. If the papers were a notice of appeal, the appeal may be dismissed.

(1) The court **denies** your request because it is incomplete. You have **10 days** after the clerk gives notice of this order (see date of service on next page) to:

- Pay the ward’s or conservatee’s fees and costs, or
- File a new revised request that includes the items listed: Below On Attachment 6b(1)

(2) The court **denies** your request because the information you provided on the request shows that the ward or conservatee is not eligible for the fee waiver for the reasons specified:

- Below On Attachment 6b(2)

The court has enclosed a blank *Request for Hearing About Court Fee Waiver Order (Ward or Conservatee)(Superior Court)* (form FW-006-GC). You have **10 days** after the clerk gives notice of this order (see date of service on next page) to:

- Pay the fees and costs in full or the amount listed in c below, or
- Ask for a hearing in order to show the court more information. (*Use form FW-006-GC to request hearing.*)

c. (1) The court needs more information to decide whether to grant your request. You must go to court on the date on page 3. The hearing will be about questions regarding your eligibility specified:

- Below On Attachment 6c(1)

(2) Bring the items of proof to support your request, if reasonably available, that are listed:

- Below On Attachment 6c(2)




Name of (Proposed) Ward or Conservatee:

Krista Maria Hamilton Doe

Case Number:

Warning! If item c is checked, and you do not go to court on your hearing date, the judge will deny your request to waive court fees, and you will have 10 days to pay the ward's or conservatee's fees. If you miss that deadline, the court cannot process the court papers you filed with your request. If the papers were a notice of appeal, the appeal may be dismissed.

NOTE TO GUARDIAN or CONSERVATOR: If there are unpaid court fees after a denial of a request for a fee waiver, your case—including the guardianship or conservatorship proceeding if the waiver is requested in that matter—might not go forward. After a denial, you may choose to advance the court costs yourself to ensure that the case proceeds. If you or another person is appointed as guardian or conservator, you would have an opportunity to be reimbursed for such advances from the assets of the guardianship or conservatorship estate, if any, as allowable expenses of administration. You might also have the right to reimbursement for advanced court costs from persons with an obligation to support the ward or conservatee from assets not part of his or her estate, such as a parent of the ward, the spouse or registered domestic partner of the conservatee who is managing the couple's community property outside the conservatorship estate, or the trustee of a trust of which the conservatee is a beneficiary.

	Date: _____	Time: _____	Name and address of court if different from above: _____ _____ _____ _____
	Dept.: _____	Room: _____	

Date: _____



Signature of (check one): Judicial Officer Clerk, Deputy



Request for Accommodations. Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least 5 days before your hearing. Contact the clerk's office for *Request for Accommodation*, Form MC-410. (Civil Code, § 54.8.)

Clerk's Certificate of Service

I certify that I am not involved in this case and (check one):

- I handed a copy of this Order to the party and attorney, if any, listed in ① and ②, at the court, on the date below.
- This order was mailed first class, postage paid, to the party and attorney, if any, at the addresses listed in ① and ②, from (city): _____, California, on the date below.
- A certificate of mailing is attached.

Date: _____

Clerk, by _____, Deputy
Name: _____

This is a Court Order.

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NO.: 289167 NAME: Rebecca Brown FIRM NAME: Public Counsel STREET ADDRESS: 610 S Ardmore Ave CITY: Los Angeles STATE: CA ZIP CODE: 90005 TELEPHONE NO.: 2133852977 FAX NO.: 2132014727 E-MAIL ADDRESS: rbrown@publiccounsel.org ATTORNEY FOR (name): Krista Maria Hamilton Doe	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse	
GUARDIANSHIP OF (name): Krista Maria Hamilton Doe	CASE NUMBER:
PETITION FOR APPOINTMENT OF GUARDIAN OF <input checked="" type="checkbox"/> MINOR* <input type="checkbox"/> MINORS* <input checked="" type="checkbox"/> Person** <input type="checkbox"/> Estate**	HEARING DATE AND TIME: DEPT.:

1. **Petitioner (name each):** Krista Maria Hamilton Doe

requests that

- a. (name): **Jane Doe**
 (address): **1234 South Main Street, Los Angeles, CA 90015**
 (telephone): **(213) 987-6543**
 be appointed guardian of the PERSON of the minor or minors named in item 2 and *Letters* issue upon qualification.
- b. (Not applicable to proposed wards 18 years of age and older.)
 (name):
 (address):
 (telephone):
 be appointed guardian of the ESTATE of the minor or minors named in item 2 and *Letters* issue upon qualification.
- c. (1) bond not be required because the petition is for guardian of the person only because the proposed guardian is a corporate fiduciary or an exempt government agency for the reasons stated in Attachment 1c.
 (2) \$ bond be fixed. It will be furnished by an authorized surety company or as otherwise provided by law. (Specify reasons in Attachment 1c if the amount is different from the minimum required by Prob. Code, § 8482.)
 (3) \$ in deposits in a blocked account be allowed. Receipts will be filed. (Specify institution and location):
- d. authorization be granted under Probate Code section 2590 to exercise the powers specified in Attachment 9.
- e. orders relating to the powers and duties of the proposed guardian of the person under Probate Code sections 2351–2358 be granted (specify orders, facts, and reasons in Attachment 1e).
- f. an order dispensing with notice to the persons named in Attachment 10 be granted.
- g. other orders be granted (specify in Attachment 1g).

2. Attached is a copy of *Guardianship Petition—Child Information Attachment* (form GC-210(CA)) for each minor for whom this petition requests the appointment of a guardian. The full legal name and date of birth of each minor is:

- a. Name: **Krista Maria Hamilton Doe** Date of Birth (month/day/year): **01/01/2005**
- b. Name: Date of Birth (month/day/year):
- c. Name: Date of Birth (month/day/year):
- d. Name: Date of Birth (month/day/year):

The names and dates of birth of additional minors are specified on Attachment 2 to this petition.

*Under section 1510.1(d) of the Probate Code, the terms *child*, *minor*, and *ward* include a youth 18 to 20 years of age.
 **You MAY use this form or form GC-210(P) for a guardianship of the person. You MUST use this form for a guardianship of the estate or of the person and estate. Do NOT use this form for a temporary guardianship.

GUARDIANSHIP OF (name):
Krista Maria Hamilton Doe

CASE NUMBER:

3. Petitioner is
- related to the minor or minors named in item 2, as shown in item 7 of each minor's attached form GC-210(CA).
 - the minor named in item 2, who is 12 years of age or older.
 - another person on behalf of minor or minors named in item 2, as shown in item 7 of each minor's attached form GC-210(CA).
4. The proposed guardian is (check all that apply):
- a nominee (affix a copy of nomination as Attachment 4a or file Nomination of Guardian (form GC-211, items 2 and 3) with this petition.
 - related to the minor or minors named in item 2, as shown in item 3 of each minor's attached form GC-210(CA).
 - other, as shown in item 3 of each minor's attached form GC-210(CA).
 - a professional fiduciary within the meaning of the Professional Fiduciaries Act. The proposed guardian's license status is shown in item 1 on page 1 of the attached Professional Fiduciary Attachment. (Use form GC-210(A-PF)/GC-310(A-PF) for this attachment.)
5. Petitioner, with intent to adopt, has accepted or intends to accept physical care or custody of the minor.
6. A person other than the proposed guardian has been nominated as the guardian of the minor by will other writing. A copy of the nomination is affixed as Attachment 6. (Specify name and address of nominee in item 2 of minor's attached form GC-210(CA).)
7. Character and estimated value of property of the estate (complete if petition requests appointment of a guardian of the estate or the person and estate):
- Personal property: \$
 - Annual gross income from all sources, including real and personal property, wages, pensions, and public benefits: \$
 - Total:** \$ _____
 - Real property: \$
8. Appointment of a guardian of the person estate of the minor or minors named in item 2 is necessary or convenient for the following reasons:
It is necessary and convenient that Jane Doe be appointed guardianship of the person or Krista Maria Hamilton Doe, who needs a legal guardian because she is a particularly vulnerable immigrant youth and needs a custodial relationship with a responsible adult in order to adjust to and thrive in a new cultural context, language, and education system, and to recover from the trauma of abandonment and violence she endured as a child in Guatemala. Krista was abandoned by her father before birth, faced violence at the hands of her caretakers and lacked a stable home, and endured violence and threats at the hands of violent gangs.
Jane Doe is biological mother and has been caring for Krista in her home and providing for his needs since immigration officers in the United States released Krista into her care in 2023. She helped Krista enroll in school, access medical care, and receive legal services. She needs a legal guardianship so that she can ensure Krista receives the services she needs, and so that she has the legal authority to make critical educational and medical decisions for her. A guardianship will promote Krista's health, safety, and welfare and provide her with stability for the first time in her life. A lack of guardianship could be devastating if Krista were to have a medical or mental health emergency. Krista wants Jane Doe to be her legal guardian and trusts her to make good decisions on her behalf.
- Continued in Attachment 8. Parental custody would be detrimental to the minor or minors named in item 2 (not applicable to proposed wards 18 years of age and older).
9. Granting the proposed guardian of the estate powers to be exercised independently under Probate Code section 2590 would be to the advantage and benefit and in the best interest of the guardianship estate. Reasons for this request and the powers requested are specified in Attachment 9.
10. Notice to the persons named in Attachment 10 should be dispensed with under Probate Code section 1511 because
- they cannot with reasonable diligence be given notice (specify names and efforts to locate in Attachment 10).
 - giving notice to them would be contrary to the interest of justice (specify names and reasons in Attachment 10).

GUARDIANSHIP OF <i>(name)</i> : Krista Maria Hamilton Doe	CASE NUMBER:
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11. (Complete this item if this petition is filed by a person who is not related to a minor named in item 2 and is not a petition for appointment of a guardian of the estate only.)
- a. Petitioner is the proposed guardian and will promptly furnish all information requested by any agency referred to in Probate Code section 1543.
 - b. Petitioner is not the proposed guardian. A statement by the proposed guardian that he or she will promptly furnish all information requested by any agency referred to in Probate Code section 1543 is affixed as Attachment 11b.
 - c. The proposed guardian's home is is not a licensed foster family home.
 - d. The proposed guardian has never filed a petition for adoption of the minor except as specified in Attachment 11d.

12. Attached to this petition is a *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form GC-120) concerning each child under 18 years of age listed in item 2 (*guardianship of the person or person and estate only*).

13. Filed with this petition are the following (*check all that apply*):
- Consent of Proposed Guardian* (form GC-211, item 1)
 - Nomination of Guardian* (form GC-211, items 2 and 3)
 - Consent to Appointment of Guardian and Waiver of Notice* (form GC-211, item 4)
 - Petition for Appointment of Temporary Guardian* (form GC-110)
 - Petition for Appointment of Temporary Guardian of the Person* (form GC-110(P))
 - Confidential Guardianship Screening Form* (form GC-212)
 - Petition for Special Immigrant Juvenile Findings* (form GC-220)

Other (*specify*):

14. All attachments to this form are incorporated by this reference as though placed here in this form. Number of pages attached:

Date: 07/25/2024



 (SIGNATURE OF ATTORNEY*)

***(All petitioners and the proposed ward—if he or she is at least 18 years of age but not yet 21 and not a petitioner—must also sign.)**

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

Date: 07/25/2024

Krista Maria Hamilton Doe

 (TYPE OR PRINT NAME)



 (SIGNATURE OF PETITIONER)

 (TYPE OR PRINT NAME)

 (SIGNATURE OF PETITIONER)

 (TYPE OR PRINT NAME)

 (SIGNATURE OF PETITIONER)

I consent to the appointment of the person named in item 1.a as guardian of my person and to his or her performance of the duties of a guardian on my behalf.

Date: 07/25/2024

Krista Maria Hamilton Doe

 (TYPE OR PRINT NAME)



 (SIGNATURE OF PROPOSED WARD)

SHORT TITLE: — Guardianship of Krista Maria Hamilton Doe	CASE NUMBER:
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ATTACHMENT (Number): 10

(This Attachment may be used with any Judicial Council form.)

1. **Father - John Hamilton, whereabouts are unknown**
2. **Paternal Grandfather - Identity and whereabouts are unknown**
3. **Paternal Grandmother - Identity and whereabouts are unknown**

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page _____ of _____

(Add pages as required)

Case Number: _____

Guardianship of *(all children's names)*: Krista Maria Hamilton Doe

This child's name: Krista Maria Hamilton Doe

Fill out a separate copy of this form for **each child** for whom your petition asks the court to appoint a guardian.

This form is attached to the Petition, **form GC-210, item 2,** or **form GC-210(P), item 8.**

The petition asks the court to appoint a guardian of this child's *(specify)*: person estate person and estate.

1 Tell the court about this child

a. Child's full legal name: Krista Maria Hamilton Doe Date of birth: 01/01/2005
First Middle Last mm/dd/yyyy

b. Child's current address: 1234 South Main Street, Los Angeles, CA 90015

c. Indian child inquiry *(Complete only if your petition asks the court to appoint a guardian of this child's person or person and estate. If your petition asks the court to appoint a guardian of this child's estate only, skip this item and go to item 1d.)*

- I have asked whether the child is or may be a member of one or more Indian tribes recognized by the federal government, or eligible for membership in such a tribe and the biological child of a tribal member, and whether the child or parents live or are domiciled on a reservation or rancheria or in an Alaskan Native village. Form ICWA-010(A), *Indian Child Inquiry Attachment*, is attached to this form.
- I have not asked about the child's Indian heritage because the parents are unavailable or deceased.

(For more information about your duties under the federal Indian Child Welfare Act (ICWA) (25 U.S.C. §§ 1901–1963) and California law, including making the inquiry and completing form ICWA-010(A) if the child is or may be an Indian child, see Information Sheet on Indian Child Inquiry Attachment and Notice of Child Custody Proceeding for Indian Child (form ICWA-005-INFO).)

d. Is this child married? Yes No Never married If you checked "No," was this child married in the past but the marriage was dissolved or ended in divorce? Yes No
(The court cannot appoint a guardian of the person for a minor child who is married or whose marriage was dissolved or ended in divorce.)

e. Is this child receiving public benefits? Yes No I don't know *(If you checked "Yes," fill in below.)*

Type of Aid	Monthly Benefit	Type of Aid	Monthly Benefit
<input type="checkbox"/> TANF (Temporary Asst. for Needy Families)	\$	<input type="checkbox"/> Other <i>(explain)</i> :	\$
<input type="checkbox"/> Social Security	\$	<input type="checkbox"/> Other <i>(explain)</i> :	\$
<input type="checkbox"/> Dept. Veterans Affairs Benefits	\$		

f. Name and address of the person with *legal* custody of this child: _____

g. *(Check this box and fill out below if the person the child lives with is not the person in f. with legal custody.)*
Name and address of the person this child lives with (who takes care of the child): Jane Doe
1234 South Main Street, Los Angeles, CA 90015



This child's name: Krista Maria Hamilton Doe**1 Tell the court about this child (continued)**

- h. (Check this box if this child has been involved in an adoption, juvenile court, marriage dissolution (divorce), domestic relations, child custody, or other similar court case.) Describe the court case below:

Type of Case	Court District or County and State or Tribe	Case Number (if known)

- i. (Check this box if this child is in or on leave from an institution supervised by the California Department of Developmental Services or the California Department of State Hospitals.) Write the name of the institution here:

2 List the names and addresses of this child's relatives and all other persons shown below:

Relationship	Name	Home Address (Street, City, State, Zip)
Mother	John Hamilton	Unknown
Father	Jane Doe	1234 South Main Street, Los Angeles, CA 90015
Grandmother (Mother's mother)	Lupe Diaz	Guatemala
Grandfather (Mother's father)	Marco Doe	Guatemala
Grandmother (Father's mother)	Unknown	Unknown
Grandfather (Father's father)	Unknown	Unknown
Sibling	Margarita Hamilton	Guatemala
Sibling	Joshua Hamilton	Guatemala
Sibling	Miguel Doe	Guatemala
Sibling		
Sibling		
Sibling		
Sibling		

- (Check here if this child has additional relatives, including parents, grandparents, siblings, or half-siblings, and list their names and addresses on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Item 2: Other Relatives" at the top of the paper and attach it to this form.)



This child's name: Krista Maria Hamilton Doe**2 List the names and addresses of this child's relatives and all other persons shown below:**

Relationship	Name	Home Address (Street, City, State, Zip)
Spouse (Guardianship of the estate only)	_____	_____
Person nominated as guardian of this child (if someone other than a proposed guardian named in 3)	_____	_____
Indian custodian (if any)	_____	_____
Child's tribe (if any and if known)	_____	_____

(Check here if there is more than one tribe that the child may be eligible for membership in, and list the names and addresses on a separate sheet of paper. Write "Form GC-210(CA)," the name of the child, and "Attachment 2: Child's tribes" at the top of the paper and attach it to this form.)

3 Information about the proposed guardian:

- a. Name (name all proposed guardians if more than one):
Jane Doe
- b. Relationship(s) to the child named in 1 (check all that apply):
- Relative (specify relationship(s) to the child of each proposed relative guardian):
Mother
- Not a relative (explain interest in or connection to this child): _____
- c. Did the child's parent(s) nominate the proposed guardian(s)? Yes No I don't know
(If you checked "Yes," attach the written nomination as Attachment 3c.)
- d. Does this child currently live with the proposed guardian(s)? Yes No I don't know
If "Yes," how long has the child lived with the proposed guardian(s)? (years, months): 1 year, 2 months
- e. If the court approves the guardianship, will this child live with the proposed guardian(s)? Yes No
- f. Does/do the proposed guardian(s) currently plan to adopt this child? Yes No I don't know

**4 Explain why appointing a guardian for the child named in 1 would be in the child's best interest:
A legal guardianship will enable Proposed Guardian to make educational, medical, health, and other decisions for
Minor. The guardianship best promotes Minor's health, safety, and welfare. See. Cal. Pro. Code § 3011(a).**

- (Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Attachment 4: Guardianship—Best Interest of Child" at the top of the paper and attach it to this form.)



This child's name: Krista Maria Hamilton Doe

5 Explain why appointing the person named in 3 to be this child's guardian would be in the child's best interest: It is necessary and convenient that Jane Doe be appointed guardianship of the person of Krista Maria Hamilton Doe. Krista needs a legal guardian because she is a particularly vulnerable immigrant youth and needs a custodial relationship with a responsible adult in order to adjust to and thrive in a new cultural context, language, and educational system, and recover from the trauma of abandonment and violence she endured as a child in Guatemala. Krista was abandoned by her father before birth, faced violence at the hands of her caretakers, and lacked a stable home, and endured violence and threats at the hands of violent gangs.

Jane Does is Krista's biological mother and has been caring for Krista in her home and providing for her needs since immigration officers in the United States release Krista into her care in May 2023. She helped Krista enroll in school, access medical care, and receive legal services. She needs a legal guardianship so that she can ensure that Krista receives the services she needs, and so that she has the legal authority to make critical educational and medical decisions for him. A guardianship will promote Krista's health, safety, and welfare and provide her with stability for the first time in her life. A lack of guardianship could be devastating if Krista were to have a medical or mental health emergency. Krista wants Jane Doe to be her legal guardian and trusts her to make good decisions on her behalf

(Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Attachment 5: Proposed Guardian—Best Interest of Child" at the top of the paper and attach it to this form.)

6 a. Does one or do both of this child's parents agree:

(1) That the court needs to appoint a guardian for the child?

Parent (name): John Hamilton Yes No I don't know

Parent (name): Reyna Doe Yes No I don't know

(2) That the person named in 3 should be the child's guardian?

Parent (name): John Hamilton Yes No I don't know

Parent (name): Reyna Doe Yes No I don't know

b. If the child is an Indian child and in the care and custody of an Indian custodian, does the Indian custodian agree:

(1) That the court needs to appoint a guardian for the child?

Custodian (name): _____ Yes No I don't know

(2) That the person named in 3 should be the child's guardian?

Custodian (name): _____ Yes No I don't know

7 Check this box if you (the petitioner) are not the person named in 3, and fill in below.

Your relationship to this child:

Relative (specify relationship): Mother

Not a relative (explain your interest in or connection to this child):

8 Except as otherwise stated in this form, the statements made in the petition to which this form is attached fully apply to this child.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Rebecca Brown 289167 Public Counsel 610 S Ardmore Ave Los Angeles CA 90005 TELEPHONE NO.: 2133852977 FAX NO. (Optional): 2132014727 E-MAIL ADDRESS (Optional): rbrown@publiccounsel.org ATTORNEY FOR (Name): Krista Maria Hamilton Doe	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse	
PETITIONER: <i>(This section applies only to family law cases.)</i> RESPONDENT: OTHER PARTY:	
<i>(This section applies only to guardianship cases.)</i> GUARDIANSHIP OF (Name): Krista Maria Hamilton Doe Minor	CASE NUMBER:
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)	

1. I am a party to this proceeding to determine custody of a child.
2. My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are *(specify number)*: _____ minor children who are subject to this proceeding, as follows:
(Insert the information requested below. The residence information must be given for the last FIVE years.)

a. Child's name Krista Maria Hamilton Doe	Place of birth Guatemala	Date of birth 01/01/2005	Sex Female
Period of residence 05/2023 to present	Address 1234 South Main Street Los Angeles CA 90015 <input type="checkbox"/> Confidential	Person child lived with <i>(name and complete current address)</i> Jane Doe <input type="checkbox"/> Confidential Same	Relationship Mother
01/2023 to 05/2023	Child's residence <i>(City, State)</i> Anunciacion House, TX	Person child lived with <i>(name and complete current address)</i> ORR Shelter	Youth Shelter
01/2005 to 12/2022	Child's residence <i>(City, State)</i> Guatemala City, Guatemala	Person child lived with <i>(name and complete current address)</i> Lupe Diaz and Marco Doe, Same	Maternal grandparent
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	
b. Child's name	Place of birth	Date of birth	Sex
<input type="checkbox"/> Residence information is the same as given above for child a. <i>(If NOT the same, provide the information below.)</i>			
Period of residence	Address	Person child lived with <i>(name and complete current address)</i>	Relationship
to present	<input type="checkbox"/> Confidential	<input type="checkbox"/> Confidential	
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	
to	Child's residence <i>(City, State)</i>	Person child lived with <i>(name and complete current address)</i>	

- c. Additional residence information for a child listed in item a or b is continued on attachment 3c.
- d. Additional children are listed on form FL-105(A)/GC-120(A). *(Provide all requested information for additional children.)*

SHORT TITLE: Guardianship of Krista Maria Hamilton Doe	CASE NUMBER:
--	--------------

4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?
 Yes No (If yes, attach a copy of the orders (if you have one) and provide the following information):

Proceeding	Case number	Court <i>(name, state, location)</i>	Court order or judgment <i>(date)</i>	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court <i>(name, state, location)</i>
d. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency		
e. <input type="checkbox"/> Adoption		

5. One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one and provide the following information):

Court	County	State	Case number <i>(if known)</i>	Orders expire <i>(date)</i>
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency				
d. <input type="checkbox"/> Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child in this case? Yes No (If yes, provide the following information):

a. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	b. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	c. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child
---	---	---

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

Date: 07/25/2024

Krista Maria Hamilton Doe

 (TYPE OR PRINT NAME)



 (SIGNATURE OF DECLARANT)

7. Number of pages attached: _____

NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.

CONFIDENTIAL (DO NOT ATTACH TO PETITION)

GC-212

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Rebecca Brown 289167		<i>FOR COURT USE ONLY</i>	
Public Counsel 610 S Ardmore Ave Los Angeles CA 90005			
TELEPHONE NO.: 2133852977 FAX NO. (Optional): 2132014727			
E-MAIL ADDRESS (Optional): rbrown@publiccounsel.org			
ATTORNEY FOR (Name): Krista Maria Hamilton Doe			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES			
STREET ADDRESS: 111 North Hill Street			
MAILING ADDRESS: Same			
CITY AND ZIP CODE: Los Angeles 90012			
BRANCH NAME: Stanley Mosk Courthouse			
GUARDIANSHIP OF (Name): Krista Maria Hamilton Doe		CASE NUMBER:	
MINOR			
CONFIDENTIAL GUARDIAN SCREENING FORM		HEARING DATE AND TIME:	DEPT.:
Guardianship of <input checked="" type="checkbox"/> Person <input type="checkbox"/> Estate			

The proposed guardian must complete and sign this form. The person requesting appointment of a guardian must submit the completed and signed form to the court with the guardianship petition.
This form must remain confidential.

How This Form Will Be Used

This form is **confidential** and will not be a part of the public file in this case. Each proposed guardian must complete and sign a separate copy of this form under rule 7.1001 of the California Rules of Court. The information provided will be used by the court and by persons and agencies designated by the court to assist the court in determining whether to appoint the proposed guardian as guardian. The proposed guardian **must** respond to each item.

1. a. **Proposed guardian (name):** Jane Doe
b. Date of birth: 05/01/1995
c. Social security number: 123-45-445 d. Driver's license number: 7895466 State: CA
e. Telephone numbers: Home: 213-987-6543 Work: Other:
2. I am I am not required to register as a sex offender under California Penal Code section 290.
(If you checked "I am," explain in Attachment 2.)
3. I have I have not been charged with, arrested for, or convicted of a crime deemed to be a felony or a misdemeanor. (If you checked "I have," explain in Attachment 3.)
 (Check here if you have been arrested for drug or alcohol-related offenses.)
4. I have I have not had a restraining order or protective order filed against me in the last 10 years.
(If you checked "I have," explain in Attachment 4.)
5. I am I am not receiving services from a psychiatrist, psychologist, or therapist for a mental health-related issue.
(If you checked "I am," explain in Attachment 5.)
6. Do you, or does any other person living in your home, have a social worker or parole or probation officer assigned to him or her?
 Yes No (If you checked "Yes," explain in Attachment 6 and provide the name and address of each social worker, parole officer, or probation officer.)
7. Have you, or has any other person living in your home, been charged with, arrested for, or convicted of any form of child abuse, neglect, or molestation? Yes No (If you checked "Yes," explain in Attachment 7.)
8. I am I am not aware of any reports alleging any form of child abuse, neglect, or molestation made to any agency charged with protecting children (e.g., Child Protective Services) or any other law enforcement agency regarding me or any other person living in my home. (If you checked "I am," explain in Attachment 8 and provide the name and address of each agency.)
9. Have you, or has any other person living in your home, habitually used any illegal substances or abused alcohol?
 Yes No (If you checked "Yes," explain in Attachment 9.)

Page 1 of 2

CONFIDENTIAL

GC-212

GUARDIANSHIP OF (Name): Krista Maria Hamilton Doe	CASE NUMBER:
MINOR	

10. Have you, or has any other person living in your home, been charged with, arrested for, or convicted of a crime involving illegal substances or alcohol?
 Yes No *(If you checked "Yes," explain in Attachment 10.)*
11. Do you or does any other person living in your home suffer from mental illness?
 Yes No *(If you checked "Yes," explain in Attachment 11.)*
12. Do you suffer from any physical disability that would impair your ability to perform the duties of guardian?
 Yes No *(If you checked "Yes," explain in Attachment 12.)*
13. I have or may have I do not have an adverse interest that the court may consider to be a risk to, or to have an effect on, my ability to faithfully perform the duties of guardian.
(If you checked "I have or may have," explain in Attachment 13.)
14. I have I have not previously been appointed guardian, conservator, executor, or fiduciary in another proceeding.
(If you checked "I have," explain in Attachment 14.)
15. I have I have not been removed as guardian, conservator, executor, or fiduciary in any other proceeding.
(If you checked "I have," explain in Attachment 15.)
16. I am I am not a private professional fiduciary, as defined in Business and Professions Code section 6501(f).
(If you checked "I am," respond to item 17. If you checked "I am not," go to item 18.)
17. I am I am not currently licensed by the Professional Fiduciaries Bureau of the Department of Consumer Affairs. My license status and information is stated in item 1 on page 1 of the Professional Fiduciary Attachment signed by me and attached to the petition that proposes my appointment as guardian in this matter. *(Complete and sign the Professional Fiduciary Attachment and attach it to the petition, or deliver it to the petitioner for attachment, before the petition is filed. See item 4d of the petition. Use form GC-210(A-PF)/GC-310(A-PF) for this attachment.)*
18. I am I am not a responsible corporate officer authorized to act for *(name of corporation):*

 a California nonprofit charitable corporation that meets the requirements for appointment as guardian of the proposed ward under Probate Code section 2104. I certify that the corporation's articles of incorporation specifically authorize it to accept appointments as guardian. *(If you checked "I am," explain the circumstances of the corporation's care of, counseling of, or financial assistance to the proposed ward in Attachment 18.)*
19. I have I have not filed for bankruptcy protection within the last 10 years.
(If you checked "I have," explain in Attachment 19.)

MINORS' CONTACT INFORMATION		
20. Minor's name: Krista Maria Hamilton Doe	School (name):	
Home telephone: (213) 987-6543	School telephone:	Other telephone:
21. Minor's name:	School (name):	
Home telephone:	School telephone:	Other telephone:
22. Minor's name:	School (name):	
Home telephone:	School telephone:	Other telephone:
<input type="checkbox"/> Information on additional minors is attached.		

DECLARATION

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

Date: **07/25/2024**

Jane Doe

(TYPE OR PRINT NAME OF PROPOSED GUARDIAN)



(SIGNATURE OF PROPOSED GUARDIAN)*

* Each proposed guardian must fill out and file a separate screening form.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): Rebecca Brown 289167 Public Counsel 610 S Ardmore Ave Los Angeles CA 90005	TELEPHONE AND FAX NOS.: 2133852977 2132014727	FOR COURT USE ONLY
ATTORNEY FOR (Name): Krista Maria Hamilton Doe		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse		
<input type="checkbox"/> ESTATE OF <input checked="" type="checkbox"/> GUARDIANSHIP OF <input type="checkbox"/> CONSERVATORSHIP OF (Name): Krista Maria Hamilton Doe		
<input type="checkbox"/> DECEDENT <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> CONSERVATEE		
ORDER PRESCRIBING NOTICE (PROBATE)		CASE NUMBER: 78986555

THE COURT ORDERS

1. The time and place of hearing* on the petition for
- a. compensation on account (Prob. Code, §§ 8547(d), 10830)
 - b. authority to continue decedent's business (Prob. Code, §§ 9760-9763)
 - c. order vacating order confirming sale (Prob. Code, §§ 10350, 10351)
 - d. court authorization for medical treatment (Prob. Code, §§ 2357(c), 3201)
 - e. appointment of a limited conservator (Prob. Code, § 1822)
 - f. other (specify): **Notice of Hearing and Petition for Appointment of Guardian of Minor and Special Immigrant Juvenile Status Findings**

(hearing) is set for

Date: 08/18/2024	Time: 11:00 a.m.	Dept.: 9	Room:
-------------------------	-------------------------	-----------------	-------

Address of court: same as noted above other (specify):


2. Petitioner shall cause notice of the hearing to be
- a. served at least (specify): **15** days before hearing personally upon (name): **mother, father, minor person with physical custody**
 - b. mailed at least (specify): **15** days before hearing, in the manner prescribed by Probate Code section 1215 to the persons listed below listed on Attachment 2b.

Name 1) Department of Children & Families	Address 201 Centre Plaza Drive, Monterey Park, CA 91754 Attn: Guardianship Section
---	--

2) All second degree relatives, which includes: grandparents (maternal and paternal), brothers and sisters over the age of 12

- c. (for limited conservatorship only) mailed to the regional center identified in Probate Code section 1827.5.

Date: **06/04/2024**



 JUDGE OF THE SUPERIOR COURT

SIGNATURE FOLLOWS LAST ATTACHMENT

* This form is not sufficient as Notice of Hearing.

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): Rebecca Brown 289167 Public Counsel 610 S Ardmore Ave Los Angeles CA 90005 TELEPHONE NO.: 2133852977 FAX NO. (<i>Optional</i>): 2132014727 E-MAIL ADDRESS (<i>Optional</i>): rbrown@publiccounsel.org ATTORNEY FOR (<i>Name</i>): Krista Maria Hamilton Doe	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse	
GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (<i>Name</i>): Krista Maria Hamilton Doe	
<input checked="" type="checkbox"/> CONSENT OF PROPOSED GUARDIAN <input type="checkbox"/> NOMINATION OF GUARDIAN <input type="checkbox"/> CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE	CASE NUMBER: 78986555

CONSENT OF PROPOSED GUARDIAN

1. I consent to serve as guardian of the person estate of the minor.

Date: **07/25/2024**

Jane Doe

(TYPE OR PRINT NAME)



(SIGNATURE OF PROPOSED GUARDIAN)

NOMINATION OF GUARDIAN

2. I am a parent of the minor a donor of a gift to the minor. I nominate (*name and address*):

as guardian of the person estate of the minor.

3. I am a parent of the minor a donor of a gift to the minor. I nominate (*name and address*):

as guardian of the person estate of the minor.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE)

NOTICE: The guardian of the person of a minor child has full legal and physical custody until the child becomes an adult or is adopted, the court changes guardians, or the court terminates the guardianship. Parents or other interested persons must petition the court to terminate the guardianship. The court will not do so unless the judge decides that termination would be in the child's best interest.

CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE


4. I consent to appointment of the guardian as requested in the *Petition for Appointment of Guardian of Minor*, filed on (date): 07/26/2024. I am entitled to notice in this proceeding, but I waive notice of hearing of the petition, including notice of any request for independent powers contained in it. I waive timely receipt of a copy of the petition. I also consent to Special Immigrant Juvenile Findings and waive notice of hearing and a copy of the petition.

07/25/2024

DATE

Krista Maria Hamilton Doe

(TYPE OR PRINT NAME)



(SIGNATURE)

Minor

RELATIONSHIP TO MINOR

07/25/2024

DATE

Jane Doe

(TYPE OR PRINT NAME)



(SIGNATURE)

Mother

RELATIONSHIP TO MINOR

DATE

(TYPE OR PRINT NAME)

(SIGNATURE)

RELATIONSHIP TO MINOR

Continued on Attachment 4.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Rebecca Brown 289167 Public Counsel 610 S Ardmore Ave Los Angeles CA 90005 TELEPHONE NO.: 2133852977 FAX NO. (Optional): 2132014727 E-MAIL ADDRESS (Optional): rbrown@publiccounsel.org ATTORNEY FOR (Name): Krista Maria Hamilton Doe	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse	
GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name): Krista Maria Hamilton Doe	
<input type="checkbox"/> CONSENT OF PROPOSED GUARDIAN <input type="checkbox"/> NOMINATION OF GUARDIAN <input checked="" type="checkbox"/> CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE	CASE NUMBER: 78986555

CONSENT OF PROPOSED GUARDIAN

1. I consent to serve as guardian of the person estate of the minor.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE OF PROPOSED GUARDIAN)

NOMINATION OF GUARDIAN

2. I am a parent of the minor a donor of a gift to the minor. I nominate (name and address):

as guardian of the person estate of the minor.

3. I am a parent of the minor a donor of a gift to the minor. I nominate (name and address):

as guardian of the person estate of the minor.

Date:

(TYPE OR PRINT NAME)

(SIGNATURE)

NOTICE: The guardian of the person of a minor child has full legal and physical custody until the child becomes an adult or is adopted, the court changes guardians, or the court terminates the guardianship. Parents or other interested persons must petition the court to terminate the guardianship. The court will not do so unless the judge decides that termination would be in the child's best interest.

CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE

4. I consent to appointment of the guardian as requested in the *Petition for Appointment of Guardian of Minor*, filed on (date): 05/26/2024. I am entitled to notice in this proceeding, but I waive notice of hearing of the petition, including notice of any request for independent powers contained in it. I waive timely receipt of a copy of the petition.

07/28/2024

DATE

Margarita Hamilton

(TYPE OR PRINT NAME)



Margarita Hamilton

(SIGNATURE)

Sister

RELATIONSHIP TO MINOR

07/28/2024

DATE

Joshua Hamilton

(TYPE OR PRINT NAME)



Joshua H.

(SIGNATURE)

Brother

RELATIONSHIP TO MINOR

07/28/2024

DATE

Miguel Doe

(TYPE OR PRINT NAME)



Miguel Doe

(SIGNATURE)

Brother

RELATIONSHIP TO MINOR

Continued on Attachment 4.

ATTORNEY OR PARTY WITHOUT ATTORNEY: NAME: Rebecca Brown FIRM NAME: Public Counsel STREET ADDRESS: 610 S Ardmore Ave CITY: Los Angeles TELEPHONE NO.: 2133852977 E-MAIL ADDRESS: rbrown@publiccounsel.org ATTORNEY FOR (name): Krista Maria Hamilton Doe	STATE BAR NO.: 289167 STATE: CA ZIP CODE: 90005 FAX NO.: 2132014727	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Stanley Mosk Courthouse		
GUARDIANSHIP OF THE PERSON <input type="checkbox"/> AND ESTATE OF (name): Krista Maria Hamilton Doe <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> MINORS		
PETITION FOR SPECIAL IMMIGRANT JUVENILE FINDINGS		CASE NUMBER: 78986555

Petitioner (name each): **Krista Maria Hamilton Doe**

alleges:

- Petitioner is (check all that apply to a single petitioner or to more than one petitioner):
 - The proposed guardian of the person or the person and estate of the minor named in item 2. This petition is filed concurrently with the petition for my appointment as guardian.
 - The guardian of the person or the person and estate of the minor named in item 2. The order appointing me was filed in this case on (date): . Letters of Guardianship were issued on (date):
 - The minor named in item 2. I am at least 12 years of age. I was born on (date): **01/01/2005**
If there are two or more wards or proposed wards in this case, I am asking the court for an order only for myself.
 - The guardian ad litem for the minor named in item 2. A certified or conformed copy of the *Order Appointing Guardian Ad Litem—Probate* (form GC-101) is attached to this petition as Attachment 1d.
 - An adult relative (specify relationship): or other person on behalf of the minor named in item 2.
- (Name of Minor):* **Krista Maria Hamilton Doe**
is a national of (country): **Guatemala**
- This court has jurisdiction under California law "to make judicial determinations about the custody and care of juveniles" within the meaning of section 101(a)(27)(J) of the Immigration and Nationality Act (INA), 8 U.S.C. § 1101(a)(27)(J), and 8 C.F.R. § 204.11(a). The minor named in item 2 is under this court's jurisdiction and will remain under that jurisdiction if the court appoints (or has appointed) a guardian of his or her person in this proceeding.
- If a guardian of the person of the minor named in item 2 has been appointed and has qualified in this proceeding, the minor is placed under the custody of an individual or entity appointed by a California state or juvenile court located in the United States within the meaning of INA section 101(a)(27)(J), 8 U.S.C. § 1101(a)(27)(J).

* (In a guardianship case involving more than one ward, prepare a separate petition for each ward for whom you are seeking SIJ findings.)

GUARDIANSHIP OF THE PERSON <input type="checkbox"/> AND ESTATE OF (name): Krista Maria Hamilton Doe <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> MINORS	CASE NUMBER: 78986555
---	-------------------------------------

Requested Findings

5. Reunification of the minor named in item 2 with one parent both parents is not viable under California law because of (check all that apply):
- abuse
- neglect
- abandonment
- another legal basis (specify):

Facts in support of this finding are stated below (for each parent with whom reunification is not viable, state the reasons that apply to that parent):

Krista Maria Hamilton Doe cannot reunify with his father due to abandonment. Under the California Family Code, abandonment means that a child has been left without provision for reasonable and necessary care or supervision. See Cal. Fam. Code § 3402(a). Under the California Welfare and Institutions Code, abandonment occurs when a "a child has been left without any provision for support." See Cal. Welf. & Inst. Code§ 300(9) Krista's father abandoned her under California law given that he has failed to visit, contact. or support Krista with any material, emotional, or financial resources throughout her life. This behavior constitutes leaving Krista without provision for reasonable and necessary care, supervision, or support and is abandonment under section 3402(a) of the California Family Code and section 300(g) of the California Welfare and Institutions Code. See concurrently filed declaration of Krista Maria Hamilton Doe.

Additional facts are stated on Attachment 5 to this petition. (You may use Attachment to Judicial Council form [\(form MC-025\)](#) for this purpose.)

GUARDIANSHIP OF THE PERSON <input type="checkbox"/> AND ESTATE OF (name): Krista Maria Hamilton Doe <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> MINORS	CASE NUMBER:
--	--------------

6. It is not in the best interest of the minor named in item 2 to be returned to the minor's or the parent's previous country of nationality or country of last habitual residence. (*specify country or countries*):
Guatemala

Facts in support of this finding are stated below:

Pursuant to section 3011 (a) of the California Family Code, it is not in Krista's best interest to return to her native Guatemala because Krista's health, safety, and welfare will be jeopardized there. In Guatemala Krista endured violence and abuse at the hands of her grandparents. Krista has no one to provide her with care or protection and faces renewed violence from gangs, who have already harmed her and threatened her life. It is in Krista's best interest to remain in the United States where she is safe and well-cared for, and receives the support she needs to recover from the trauma she has endured. See Cal. Fam. Code§ 3011 (a).

Please refer to the concurrently filed declaration.

Additional facts are stated on next page.

GUARDIANSHIP OF THE PERSON <input type="checkbox"/> AND ESTATE OF (name): Krista Maria Hamilton Doe <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> MINORS	CASE NUMBER:
--	--------------

6. (continued):

Additional facts are stated on Attachment 6 to this petition. (You may use Attachment to Judicial Council form [\(form MC-025\)](#) for this purpose.)

7. All attachments to this form are incorporated by this reference as though placed here in this form. There are ___ pages attached.

Date: 07/25/2024

Rebecca Brown

(TYPE OR PRINT NAME OF ATTORNEY)



(SIGNATURE OF ATTORNEY*)

* All petitioners must also sign (Prob. Code, § 1020).

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

Date: 07/25/2024

Krista Maria Hamilton Doe

(TYPE OR PRINT NAME)



(SIGNATURE OF PETITIONER)

(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

1 Sara Van Hofwegen (Cal. Bar No.266985)
Public Counsel
2 610 S. Ardmore Avenue
Los Angeles, CA 90005
3 (213) 201-4712

4 Pro Bono Attorney for Petitioner
[REDACTED]

5
6 **SUPERIOR COURT OF THE STATE OF CALIFORNIA**
7 **FOR THE COUNTY OF LOS ANGELES**
8 **CENTRAL DISTRICT**
9

10 In re:

Case No. [REDACTED]

11 Guardianship of [REDACTED]

12 **DECLARATION OF [REDACTED]**
[REDACTED] IN SUPPORT OF GUARDIANSHIP
AND REQUEST FOR SPECIAL
IMMIGRANT JUVENILE STATUS
FINDINGS

14 **Hearing:**

Date: [REDACTED]

15 Time: [REDACTED] AM

16 Dept: [REDACTED]

1 CASE NUMBER:

2 PETITIONER: [REDACTED]

3 CASE NAME: Guardianship of [REDACTED]

4 **Declaration of Petitioner**

5 I, [REDACTED] am the Petitioner in this matter and if I were called to court and were
6 sworn under oath, I would testify to the truth of the facts obtained herein. I make this declaration
7 from my own knowledge and the best that I can remember.

- 8 1. My full name is [REDACTED] I was born on [REDACTED], in
9 [REDACTED], Guatemala. I am nineteen years old. Even though I am
10 now nineteen years old, I want this court to appoint my mother, [REDACTED]
11 [REDACTED], to be my legal guardian.
- 12 2. I am the son of [REDACTED]. I know that my mother, [REDACTED]
13 [REDACTED], is my mother because she raised me from birth and because she appears on my
14 birth certificate.
- 15 3. I never knew my father. I believe his first name is [REDACTED] but I don't know anything
16 about him, or his whereabouts. He never gave me any emotional or financial support,
17 and has never been a part of my life in any way. He never wanted anything to do with
18 me. It has been very hard for me to grow up without a father in my life to care for and
19 protect me. In Guatemala, most people have two last names – reflecting both their
20 father's and their mother's names. But I only have one last name, "[REDACTED]," after my
21 mother so everyone knew that my father was not part of my life. People would insult
22 and say mean things to me because I did not have a father in my life, and I felt sad
23 and unwanted.
- 24 4. In Guatemala, I lived in the town of [REDACTED] with my mother, grandparents, and
cousins. When I was about twelve or thirteen years old, my mother [REDACTED]

1 [REDACTED], came to the United States, leaving me with my grandparents. My mother
2 always loved me and worked to take care of me even though we were not together. I
3 was still able to talk to my mother on the phone regularly, and she sent me money
4 every couple weeks.

5 5. After my mother moved to the United States, I lived with my grandparents.. I did not
6 liking living with them because of how they treated me and my mother. They were
7 very upset that my mom had me without being married because they think it is a sin
8 to have a child outside of marriage. I would always hear them yelling at my mom and
9 calling her names like stupid and beggar.

10 6. My grandparents saw me as a reminder of my mother's sin and I think this is why
11 they hurt me so much. Starting from when I was really young, my grandparents hit
12 me. They would become angry with me and hit me all over my body with whatever
13 was nearby, like a belt or a lasso. The beatings would leave bruises and marks on my
14 body; sometimes they would even break skin and make me bleed. They would also
15 call me names like stupid, useless, and *pendejo* (asshole). They called me "*pepe*"
16 which is an insult for people who don't have fathers. Everything my sisters and I did
17 made them mad, and they would hit and hurt us. My aunt also lived with us and she
18 would hit, push, and call us names too. I felt like I wanted to disappear because I had
19 nothing in life.

20 7. I was too scared to go anywhere for help. My grandmother said that her parents used
21 to hit her. She thought she had the right to hurt my sisters and me because we were
22 children in her home. I knew that she would be furious with me if I told anyone what
23 she did to me, and I thought it would be worse for me. I also knew the police would
24 not help me. In Guatemala, there are not laws to protect children from violence, and
the police are corrupt. They do not help the community or care about protecting
people like me.

- 1 8. I could not seek help at school because I had to leave school to start working when I
2 was 17 years old. I did not want to leave school but my grandparents told me they
3 could not afford to send me to school any longer.
- 4 9. There is a lot of gang activity in [REDACTED] and throughout Guatemala. The gang
5 called (18) was the most powerful gang in the area where I lived. They would put
6 graffiti on the walls that said 18 in roman numerals (XVIII). In my area, the gang
7 members always wore black rosary necklaces. They would assault and rob people in
8 our community, and it seemed like they were everywhere.
- 9 10. I was really scared of the gang members. They robbed me, beat me several times,
10 called me names like bastard, bitch, *marica* (sissy), *hueco* (faggot), and threatened
11 and actually cut my stomach with a big knife. I still have a scar. They threatened to
12 kill me.. I knew that my life was in danger and that there was no one in Guatemala to
13 protect me. My grandparents hated me and would do nothing to protect me. So I fled
14 to the United States.
- 15 11. In [REDACTED] y 2018, when I was seventeen years old, immigration officers detained me
16 when I entered the United States. They took me to a shelter for unaccompanied
17 minors, where I spent about 3 weeks, and then released me to my mother, [REDACTED],
18 in [REDACTED], CA. Living with my mother, I feel safe for the first time in my life.
- 19 12. I live with my mother and three of my siblings, [REDACTED], in [REDACTED]
20 CA. I'm happy living with them and we get along well. I feel much safer here than in
21 Guatemala. My mother cares for me and makes sure that I have everything that I
22 need. Even when I was living in Guatemala, she worked and sent money to help me.
23 Now that we are together in the United States, she makes sure that I am happy and
24 feel supported. She gives me good advice and helps me make good decisions.
13. When I arrived in the United States, my mother also helped me enroll in high school.
She signed me up for the 12th grade at [REDACTED] in [REDACTED] CA. My
mother also helped me find a lawyer to represent me in my immigration case. I never

1 would have found or known how to find a lawyer without her. My mother also makes
2 sure I get the medical care I need and has helped me go to the dentist.

3 14. I would never be able to survive in the United States without my mother, and I
4 depend on her completely. I do not speak English or understand how things work in
5 the United States, and I need my mother's help. I understand that I am now eighteen
6 and have the right to make my own decisions, but I want my mother to have this
7 power over me. I trust her completely and I am so happy that I finally have someone
8 to take care of me.

9 15. I am really glad to be in the United States, but I still feel really bad when I think about
10 everything that happened to me in Guatemala. I used to have nightmares in
11 Guatemala and I have them here too. I also feel sad thinking about how badly my
12 grandparents treated me and all the terrible things they did to me. I believe that with
13 my mother's help I can have a much better life here in the United States. I want her to
14 be my legal guardian because I trust her and she has always given me the love and
15 support I needed. I know she will help me and make sure I have all the help I need to
16 succeed in life.

17 16. I want my mother to continue to help me and make legal decisions for me. I trust her
18 and I know she will do what is best for me. I feel better knowing that I will be able to
19 continue living with her and that she will be responsible for me.

20 17. I am terrified that I will lose my life if I go back to Guatemala. I will have no choice
21 but to live with my grandparents and they will continue to beat and hurt me like
22 before. They view me as a sign of my mother's sin because she was not married to my
23 father, and they hate me because I am her son. I am also terrified that the gang
24 members will kill me. Here in the United States, I feel safe because my mother takes
care of me and provides for me. I can get everything I need, not just survive. I can go
to school, get a good job, and have a career. I ask that you please grant my mother
guardianship over me and make Special Immigrant Juvenile findings on my behalf.

SIGNATURE PAGE

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge and ability. Executed on [REDACTED] [REDACTED], at Los Angeles, California.

[REDACTED]

CERTIFICATION OF TRANSLATION

I, Daniel Sanchez, declare and say as follows:

I certify that I am competent to render translation in both the English and Spanish languages, that I have translated the oral declaration of [REDACTED] into English to the best of my knowledge and ability from Spanish, and I have reviewed it in Spanish with [REDACTED], who confirmed that he understood and verified the contents thereof prior to signing.

I declare under penalty of perjury that the foregoing is true and correct. Executed on this [REDACTED], 2020 in Los Angeles, California.


Daniel Sanchez

APPENDIX D:
Sample Physician's Declaration



1 Ylianna Perez-Guerrero (BN195498)
2 Public Counsel
3 610 S. Ardmore Avenue
4 Los Angeles, CA 90005
5
6
7
8
9 Tel: (213) 385-2977
10
11 Attorney for Petitioner
12
13
14

SUPERIOR COURT OF CALIFORNIA
COUNTY OF LOS ANGELES

9 Guardianship of) CASE NO.
10)
11) DECLARATION OF PHYSICIAN
12) IN SUPPORT OF PETITION
13) FOR GUARDIANSHIP
14)
15)
16)
17)
18)
19)
20)
21)
22)
23)
24)
25)
26)
27)
28)

15 I, _____, M.D., declare as follows:
16 Name of Physician

17 1. I am a physician licensed to practice in the State of California. I am presently employed at
18 _____, at _____,
19 Name of Hospital, Inc., Medical Group, Etc Address
20 _____ California, my telephone number is _____

21 2. _____, has been under my medical care since _____
22 Date
23 and has a terminal condition as defined by Section 2105(f) of the Probate Code.

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

26 Executed on _____ in Los Angeles, California _____
27 Date Zip Code

28 _____
Type or print name of physician Signature of physician

APPENDIX E:
Sample Intake Form and Case
Summary Letter
(Guardianship/SIJS)



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Dickerson Insurance Services
JEROME L. LEVINE
Holland & Knight LLP (Ret.)
BARBARA E. MATHEWS
Southern California Edison (Ret.)
SHARON MAYER
Bird, Marcella, Boxer, Wolpert, Nestim,
Drooks, Lincenberg & Rhoads, P.C.
KATHRYN L. MCCANN
Annaguey McCann LLP
MARK R. McDONALD
Morrison & Foerster LLP
MARCELLUS A. MCRAE
Gibson, Dunn & Crutcher LLP
ALISSA MILLER
Akin Gump Strauss Hauer & Feld LLP
BRAD MILLER
Davis Wright Tremaine LLP
STEVEN A. NISSEN
Hollywood Chamber of Commerce
NASEEM NIXON
The Capital Group Companies, Inc.
THOMAS J. NOLAN
Law Office of Thomas J. Nolan
NEIL R. O'HANLON
Law Office of Neil R. O'Hanlon
ELIZABETH Y. J. OH
Latham & Watkins LLP
AJAY A. PATEL
Amazon Studios
LAURA R. PETROFF
Winston & Strawn LLP
KATE E. PHELAN
U.S. Bank
STEPHEN E. PUCKETT*
Southern California Edison (Ret.)
BARRY PORTER
Clarity Partners
SHANA E. RAMIREZ
Katten Muchin Rosenman LLP
RAHUL RAVIPUDI
Pamihl Shea | Boyle | Ravipudi LLP
PHILIP R. RECHT
Mayer Brown LLP
KEVIN D. RISING
Barnes & Thornburg LLP
ALEXANDRA A. ROJE
Latham & GP LLP
RICK R. ROTHMAN
Morgan, Lewis & Bockius LLP
JASON D. RUSSELL
Skadden, Arps, Slate, Meagher & Flom LLP
NATALIE SAMARIJAN
Coro Southern California
MARK A. SAMUELS
O'Melveny & Myers LLP
ROBERT F. SCOLAR*
Dentons US LLP
STUART N. SENATOR
Munger, Tolles & Olson LLP
ROMAN M. SILBERFELD*
Robins Kaplan LLP
KATE T. SPELMAN
Jenner & Block LLP
MICHAEL S. SPINDLER
B. Riley Advisory Services
DEBORAH L. STEIN
Gibson, Dunn & Crutcher LLP
MICHAEL H. STEINBERG*
Sullivan & Cromwell LLP
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Strange LLP
C. THOMAS STROMBERG
GTS Consulting LLC
RANDALL J. SUNSHINE
Liner LLP (Ret.)
PAUL W. SWEENEY, JR.*
K&L Gates LLP
GAIL MCDAL TITTLE*
ADR Services, Inc.
BRYAN VITNER
Berkeley Research Group (BRG)
JOEL R. WEINER
Katten Muchin Rosenman LLP
DONNA L. WILSON
Manatt, Phelps & Phillips, LLP
ROBERT S. WOLFE
LAURA A. WYTSMA*
Venable LLP
MARTIN S. ZOHN*
Proskauer

*Past Chair



The nation's largest pro bono law firm

Via USPS Priority Mail

July 22, 2024

Annie Attorney
The Law Firm
500 South Broad Street, California 91521-1405

RE: Marie Minor Alvarez
Legal Issue: Special Immigrant Juvenile Status

Dear Annie:

Thank you for agreeing to represent Gina Guardian in her attempt to have the Probate Court grant her and her husband, Gary Guardian, legal guardianship of their niece, Marie. Thank you also for your assistance in requesting the Probate Court issue Marie an order regarding eligibility for Special Immigrant Juvenile Status (SIJS). We direct you to our manual located on our website to assist you in preparing the case. Please find our manual entitled Legal Guardianship Attorney Manual at the following location:

<http://www.publiccounsel.org/publications?id=0032>

Please let us know if you have any trouble accessing the manual.

Nine-year-old Marie has lived with her paternal aunt and uncle, Mr. and Mrs. Guardian, since she was just a few months old. She was born in Rosarito, Mexico. Marie's mother died of a heart attack just 9 days after Marie was born. After her mother's death, Marie bounced between maternal relatives' homes. Her father was an alcoholic and unable and uninterested in caring for his daughter. He has in fact never met Marie. Mr. and Mrs. Guardian learned of Marie and offered to assist. They agreed to care for her as their own daughter and have done so since Marie was just under two months old. When she arrived to their care, she was malnourished and sick. She recovered quickly and is a healthy, happy nine-year-old who does well in school. Marie calls Mr. and Mrs. Guardian 'papa' and 'mama' though she knows that legally they are her paternal aunt and uncle.

Mr. and Mrs. Guardian contacted an attorney at Levitt & Quinn with an interest in adopting Marie. Because her father is impossible to locate, the adoption is not possible. They have agreed that legal guardianship is the next best thing. It was the Levitt & Quinn attorney who referred the family to Public Counsel for assistance with both legal guardianship and SIJS.

Mrs. Guardian asks that you file a petition for permanent guardianship and a petition for factual findings on SIJS with the Los Angeles Probate Court as soon as possible.

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Financial Officer
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Vice President &
Chief Development Officer
FREDERICK M. NICHOLAS
Founder

Once the order of SIJS eligibility is granted, our in-house attorney, Kristen Jackson, will represent Marie in her application process with the United States Citizenship and Immigration Service.

Please do not include any information about how Marie's caregivers, or other relatives, may have assisted her to enter the United States. This may cause legal problems for Marie's caregivers and place her at risk. Mrs. Guardian is a United States citizen. Mr. Guardian is a Legal Permanent Resident.

We ask that you file the petition for legal guardianship and the request for the SIJS order by December 31, 2020. If there are problems with this timeline, please let us know.


In addition to the details above, the information on the following pages will be helpful to you in completing the guardianship petition and SIJS order request. Please feel free to contact us at any time if you need clarification or additional information. Our in-house Probate expert is Ylianna Guerrero at yguerrero@publiccounsel.org and our in-house SIJS expert is Kris Jackson at kjackson@publiccounsel.org or (213) 385-2977 extension 157. Both Mr. and Mrs. Rubio are most comfortable in Spanish. Marie is bilingual, and her adult cousin Catrina Cardenas is willing to assist with any interpretation.

Thank you again for your generosity in taking on this case. Please let us know if you have any questions. Beth can be reached at (213) 385-2977 extension 156 or btsoulos@publiccounsel.org.

Sincerely,



Kristen Jackson
Senior Staff Attorney
Immigrant's Rights Project



Ylianna Guerrero
Supervising Attorney
Children's Rights Project



Beth Tsoulos
Senior Social Worker
Children's Rights Project

Relevant Contacts

Child:

Marie Minor Alvarez
54111 Seamore Drive, Downey, CA 92222.

DOB: 6/28/2011
Born in Rosarito, Mexico

Attends Downey Charter Academy

School number: (818) 111-1111

Proposed Legal Guardians

Gina Guardian, paternal aunt
54111 Seamore Drive
Downey, CA 92222
(213) 333-3334

DOB: 9/1/1949
CA ID: B98765437
SSN: 123-45-6789

Gary Guardian, uncle
54111 Seamore Drive
Downey, CA 92222

DOB: 8/6/1942
CA ID: N8055232
SSN: Will provide

Marie's Cousin (English family member contact)

Catrina Cardenas
(213) 444-4443

Marie's Mother:

Bertha Marie Alvarez Ramirez
Deceased 7/6/2011

Marie's Father:

Mario Manuel Gonzalez Garcia
Last contact 2 years ago
May be in Rosarito or Jalisco Mexico

Marie's Maternal Grandmother

Ana Gonzalez
Deceased

Marie's Maternal Grandfather

Antonio Alvarez
Dirección Conocido
El Corral De Piedra
Jalisco, Mexico

Marie's Paternal Grandparents

Myra Perez and Gonzalo Alvarez
Both deceased

Marie's Siblings

Gonzalo Alvarez, about 25 years
Rosarito, Mexico

Cecilia Alvarez, about 23 years
Northern California

Vicky Alvarez, 17
In foster care in Northern California

Marie's address since arriving in the United States in 2011

With Mr. and Mrs. Dimas
54111 Seamore Drive
Downey, CA 92222

APPENDIX F:
Sample Set of Completed
Guardianship Forms



Guardianship Petition

Mary Doe

Central

This form must be used by a guardian or conservator, or by a petitioner for the appointment of a guardian or conservator, to request a waiver of court fees in the guardianship or conservatorship court proceeding or in any other civil action in which the guardian or conservator represents the interests of the ward or conservatee as a plaintiff or defendant.

If the ward or conservatee (including a proposed ward or conservatee if a petition for appointment of a guardian or conservator has been filed but has not yet been decided by the court) directly receives public benefits or is supported by public benefits received by another for their support, is a low-income person, or does not have enough income to pay for their household's basic needs and the court fees, you may use this form to ask the court to waive the court fees.

The court may order you to answer questions about the finances of the ward or conservatee. If the court waives the fees, the ward or conservatee, their estate, or someone with a duty to support the ward or conservatee, may still have to pay later if:

- You cannot give the court proof of the ward's or conservatee's eligibility,
- The ward's or conservatee's financial situation improves during this case, or
- You settle the civil case on behalf of the ward or conservatee for **\$10,000** or more. The trial court that waives fees will have a lien on any such settlement in the amount of the waived fees and costs. The court may also charge the ward or conservatee, or their estate, any collection costs.

Clerk stamps date here when form is filed.

Fill in court name and street address:

Superior Court of California, County of
LOS ANGELES
111 North Hill Street
Los Angeles CA 90012

Downtown Los Angeles

Fill in case number and name:

Case Number:

Case Name:
Guardianship of Jane Doe and John
Doe

1 Your Information (guardian or conservator, or person asking the court to appoint a guardian or conservator):

Name: Mary Doe

Phone: 111-222-3333

Street or mailing address: 345 Treetop Avenue, Apt 2

City: Los Angeles State: CA Zip: 90000

2 Your Lawyer (if you have one): Name: In Pro Per* (Spanish Speaking Only)

Firm or Affiliation: _____ State Bar No.: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Email: _____

a. The lawyer has agreed to advance all or a portion of court fees or costs (check one): Yes No

b. (If yes, your lawyer must sign here.) Lawyer's signature: N/A

If your lawyer is not providing legal-aid type services based on your or the ward's or conservatee's low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.

3 Ward's or Conservatee's Information (file a separate Request for each ward in a multiward case):

Name: Jane Doe

Age and date of birth (ward only):

Street or mailing address: 345 Treetop Avenue, Apt 2

17 05/31/07

City: Los Angeles State: CA Zip: 90000

Phone: 111-222-3333

4 Ward's or Conservatee's Lawyer, if any: Name: _____

Firm or Affiliation: _____ State Bar No.: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Email: _____

5 Ward or Conservatee's Job (job title; if not employed, so state): Not employed

Name of employer: _____

Employer's address: _____ State: _____ Zip: _____



Name of (Proposed) Ward or Conservatee:

Jane Doe

Case Number:

6 What court's fees or costs are you asking to be waived?

- Superior Court (See Information Sheet on Waiver of Superior Court Fees and Costs (form FW-001-INFO).)
Supreme Court, Court of Appeal, or Appellate Division of Superior Court (See Information Sheet on Waiver of Appellate Court Fees (form APP-015/FW-015-INFO).)

7 Check here if you asked the court to waive court fees for this case in the last six months. (If your previous request is reasonably available, please attach it to this form and check here):

8 Why are you asking the court to waive the ward's or conservatee's court fees?

- The ward or one or both of the ward's parents, or the conservatee or the conservatee's spouse or registered domestic partner, receive (check all that apply):
Supplemental Security Income (SSI) State Supplemental Payment (SSP) SNAP (Food Stamps)
IHSS (In-Home Supportive Services) CalWORKS or Tribal TANF Medi-Cal
County Relief/General Assistance CAPI (Cash Assistance Program for Aged, Blind, and Disabled)
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program)
Unemployment Compensation

(Names and relationships to ward or conservatee of persons who receive the public benefits listed above):

Proposed Ward

b. The gross monthly income of the ward's or conservatee's household (before deductions for taxes) is less than the amount listed below. (If you check 8b, you must fill out items 14, 15, and 16 on page 4 of this form.)*

Table with 6 columns: Family Size, Family Income, Family Size, Family Income, Family Size, Family Income. Rows show income thresholds for family sizes 1-6.

c. The ward's or conservatee's household does not have enough income to pay for its basic needs and the court fees. I ask the court to (check one, and you must fill out items 14, 15, 16, 17, and 18 on page 4):*

- (1) Waive all court fees and costs. (2) Waive some court fees and costs.
(3) Let the (proposed) guardian or conservator, on behalf of the (proposed) ward or conservatee, make payments over time.

* (Do not include income of guardian or conservator living in the household in 8b or 8c or count them in family size in 8b. unless they are a parent of the ward or the spouse or registered domestic partner of the conservatee.)

Guardians or petitioners for their appointment must complete items 9 and 10.

9 Ward's Estate: Person only, no estate. Inventory or petition estimated value:

Source (e.g., gift, inheritance, settlement, judgment, insurance): Est. collection date:

10 Ward's Parents' Information:

a. Name of ward's parent Santiago Doe Deceased (date of death):
Street or mailing address: Mexico
City: State: Zip:
Phone:

b. Name of ward's parent: Adriana Gomez Deceased (date of death):
Street or mailing address: Unknown
City: State: Zip:
Phone:

c. Ward's parents are (check all that apply): married living together separated divorced
Support order for ward? No Yes Payable to (name):
Payor (name):
Court: Case Number:
Date of order (if multiple, date of latest): Monthly amount:



Name of (Proposed) Ward or Conservatee:

Jane Doe

Case Number:

Conservators or petitioners for their appointment must complete items 11–13.

11 Conservatee's Estate: Person only, no estate.

Inventory or petition estimated value:

Est. collection date:

12 Conservatee's Spouse's or Registered Domestic Partner's Information:

Name of conservatee's spouse or registered domestic partner: _____ Spouse Partner

Date of marriage or partnership: _____ Deceased (date of death): _____

Street or mailing address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Name of employer (if none, so state): _____

Employer's address: _____ State: _____ Zip: _____

The conservatee's spouse or partner is is not managing, or following appointment of a conservator is planning to manage, some or all of the couple's community property outside the conservatorship estate.

If you selected "is" above: The income, money, and property shown on page 4 includes does not include the income and property managed, or expected to be managed, by the spouse/partner outside the estate.

Divorced (date of final judgment or decree): _____

Court: _____

Case Number: _____ Support order for conservatee? No Yes

Date of support order (if multiple, date of latest): _____ Monthly amount: _____

13 The Conservatee and Trusts:

The conservatee:

a. is is not a trustor or settlor of a trust.

b. is is not a beneficiary of a trust.

If you selected "Is" to complete any of the above statements, identify and provide, in an attachment to this Request, the current address and telephone number of the current trustee(s) of each trust, describe the general terms of and value of each trust and the nature and value of the conservatee's interest in each trust, and the amount(s) and frequency of any distributions to or for the benefit of the conservatee prior to your appointment as conservator of which you are aware. (You may use Judicial Council form MC-025 for this purpose.)

All applicants who checked item 8b or item 8c on page 2 must continue to and follow the instructions for completion of items 14–16 or items 14–18 on page 4, before signing below.

The information I have provided on this form and all attachments about the (proposed) ward or conservatee is true and correct to the best of my information and belief. The information I have provided on this form and all attachments concerning myself is true and correct. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: 07/26/2024

Mary Doe
Print your name here


Sign here



Name of (Proposed) Ward or Conservatee:

Jane Doe

Case Number:

If you checked 8a on page 2, do not fill out below. If you checked 8b, you must answer questions 14–16. If you checked 8c, you must answer questions 14–18. If you need more space, attach form MC-025 or attach a sheet of paper, and write "Financial Information" and the ward's or conservatee's name and case number at the top.

14 Check here if the ward's or conservatee's income changes a lot from month to month. If it does, complete the form based on their average income for the past 12 months.

15 Ward's or Conservatee's Gross Monthly Income

a. List the source and amount of any income the ward or conservatee gets each month, including: wages or other income from work before deductions, spousal/child support, retirement, social security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income, reimbursement for job-related expenses, gambling or lottery winnings, etc.

- (1) \$
(2) \$
(3) \$
(4) \$
(5) \$

b. Total monthly income: \$

16 Ward's or Conservatee's Household's Income

a. List the income of all other persons living in the ward's or conservatee's home who depend in whole or in part on them for support, or on whom they depend in whole or in part for support.

Table with columns: Name, Age, Relationship, Gross Monthly Income. Rows 1-10.

b. Total monthly income of persons above: \$

Total monthly income and household income (15b plus 16b): \$

17 Ward's or Conservatee's Household's Money and Property

a. Cash \$

b. All financial accounts (list bank name and amount):

- (1) \$
(2) \$
(3) \$

c. Cars, boats, and other vehicles

Table with columns: Make / Year, Fair Market Value, How Much You Still Owe. Rows 1-3.

d. Real estate

Table with columns: Address, Fair Market Value, How Much You Still Owe. Rows 1-2.

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.):

Table with columns: Describe, Fair Market Value, How Much You Still Owe. Rows 1-2.

18 Ward's or Conservatee's Household's Monthly Deductions and Expenses

a. List any payroll deductions and the monthly amount below:

- (1) \$
(2) \$
(3) \$
(4) \$

b. Rent or house payment and maintenance \$

c. Food and household supplies \$

d. Utilities and telephone \$

e. Clothing \$

f. Laundry and cleaning \$

g. Medical and dental expenses \$

h. Insurance (life, health, accident, etc.) \$

i. School, child care \$

j. Child, spousal support (another marriage) \$

k. Transportation, gas, auto repair and insurance \$

l. Installment payments (list each below):

- Paid to:
(1) \$
(2) \$
(3) \$

m. Wages/earnings withheld by court order \$

n. Any other monthly expenses (list each below).

- Paid to: How Much?
(1) \$
(2) \$
(3) \$

Total monthly expenses (add 18a – 18n above): \$

To list any other facts you want the court to know, such as the (proposed) ward's or conservatee's unusual medical expenses, etc, attach form MC-025 or attach a sheet of paper and write "Financial Information" and the (proposed) ward's or conservatee's name and case number at the top.

Check here if you attach another page. []

Important! If the ward's or conservatee's financial situation or ability to pay court fees improves, you must notify the court within five days on form FW-010-GC.

Do not include income of guardian or conservator living in the household in item 16, their money and property in item 17, or their deductions and expenses in item 18 unless they are a parent of the ward or the spouse or registered domestic partner of the conservatee.

This form must be used by a guardian or conservator, or by a petitioner for the appointment of a guardian or conservator, to request a waiver of court fees in the guardianship or conservatorship court proceeding or in any other civil action in which the guardian or conservator represents the interests of the ward or conservatee as a plaintiff or defendant.

If the ward or conservatee (including a proposed ward or conservatee if a petition for appointment of a guardian or conservator has been filed but has not yet been decided by the court) directly receives public benefits or is supported by public benefits received by another for their support, is a low-income person, or does not have enough income to pay for their household's basic needs and the court fees, you may use this form to ask the court to waive the court fees.

The court may order you to answer questions about the finances of the ward or conservatee. If the court waives the fees, the ward or conservatee, their estate, or someone with a duty to support the ward or conservatee, may still have to pay later if:

- You cannot give the court proof of the ward's or conservatee's eligibility,
- The ward's or conservatee's financial situation improves during this case, or
- You settle the civil case on behalf of the ward or conservatee for **\$10,000** or more. The trial court that waives fees will have a lien on any such settlement in the amount of the waived fees and costs. The court may also charge the ward or conservatee, or their estate, any collection costs.

Clerk stamps date here when form is filed.

Fill in court name and street address:

Superior Court of California, County of
LOS ANGELES
111 North Hill Street
Los Angeles CA 90012

Downtown Los Angeles

Fill in case number and name:

Case Number:

Case Name:
Guardianship of Jane Doe and John
Doe

1 Your Information (guardian or conservator, or person asking the court to appoint a guardian or conservator):

Name: Mary Doe

Phone: 111-222-3333

Street or mailing address: 345 Treetop Avenue, Apt 2

City: Los Angeles State: CA Zip: 90000

2 Your Lawyer (if you have one): Name: In Pro Per* (Spanish Speaking Only)

Firm or Affiliation: _____ State Bar No.: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Email: _____

a. The lawyer has agreed to advance all or a portion of court fees or costs (check one): Yes No

b. (If yes, your lawyer must sign here.) Lawyer's signature: N/A

If your lawyer is not providing legal-aid type services based on your or the ward's or conservatee's low income, you may have to go to a hearing to explain why you are asking the court to waive the fees.

3 Ward's or Conservatee's Information (file a separate Request for each ward in a multiward case):

Name: John Doe

Age and date of birth (ward only):

Street or mailing address: 345 Treetop Avenue, Apt 2

15 06/21/09

City: Los Angeles State: CA Zip: 90000

Phone: 111-222-3333

4 Ward's or Conservatee's Lawyer, if any: Name: _____

Firm or Affiliation: _____ State Bar No.: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Email: _____

5 Ward or Conservatee's Job (job title; if not employed, so state): Not employed

Name of employer: _____

Employer's address: _____ State: _____ Zip: _____



Name of (Proposed) Ward or Conservatee:

John Doe

Case Number:

6 What court's fees or costs are you asking to be waived?

- Superior Court (See Information Sheet on Waiver of Superior Court Fees and Costs (form FW-001-INFO).)
Supreme Court, Court of Appeal, or Appellate Division of Superior Court (See Information Sheet on Waiver of Appellate Court Fees (form APP-015/FW-015-INFO).)

7 Check here if you asked the court to waive court fees for this case in the last six months. (If your previous request is reasonably available, please attach it to this form and check here):

8 Why are you asking the court to waive the ward's or conservatee's court fees?

- a. The ward or one or both of the ward's parents, or the conservatee or the conservatee's spouse or registered domestic partner, receive (check all that apply):
Supplemental Security Income (SSI) State Supplemental Payment (SSP) SNAP (Food Stamps)
IHSS (In-Home Supportive Services) CalWORKS or Tribal TANF Medi-Cal
County Relief/General Assistance CAPI (Cash Assistance Program for Aged, Blind, and Disabled)
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC Program)
Unemployment Compensation

(Names and relationships to ward or conservatee of persons who receive the public benefits listed above):

Proposed Ward

b. The gross monthly income of the ward's or conservatee's household (before deductions for taxes) is less than the amount listed below. (If you check 8b, you must fill out items 14, 15, and 16 on page 4 of this form.)*

Table with 6 columns: Family Size, Family Income, Family Size, Family Income, Family Size, Family Income. Rows show income thresholds for family sizes 1-6.

c. The ward's or conservatee's household does not have enough income to pay for its basic needs and the court fees. I ask the court to (check one, and you must fill out items 14, 15, 16, 17, and 18 on page 4):*

- (1) Waive all court fees and costs. (2) Waive some court fees and costs.
(3) Let the (proposed) guardian or conservator, on behalf of the (proposed) ward or conservatee, make payments over time.

* (Do not include income of guardian or conservator living in the household in 8b or 8c or count them in family size in 8b. unless they are a parent of the ward or the spouse or registered domestic partner of the conservatee.)

Guardians or petitioners for their appointment must complete items 9 and 10.

9 Ward's Estate: Person only, no estate. Inventory or petition estimated value:

Source (e.g., gift, inheritance, settlement, judgment, insurance): Est. collection date:

10 Ward's Parents' Information:

a. Name of ward's parent Santiago Doe Deceased (date of death):
Street or mailing address: Mexico
City: State: Zip:
Phone:

b. Name of ward's parent: Adriana Gomez Deceased (date of death):
Street or mailing address: Unknown
City: State: Zip:
Phone:

c. Ward's parents are (check all that apply): married living together separated divorced
Support order for ward? No Yes Payable to (name):
Payor (name):
Court: Case Number:
Date of order (if multiple, date of latest): Monthly amount:



Name of (Proposed) Ward or Conservatee:

John Doe

Case Number:

Conservators or petitioners for their appointment must complete items 11–13.

11 Conservatee's Estate: Person only, no estate.

Inventory or petition estimated value:

Est. collection date:

12 Conservatee's Spouse's or Registered Domestic Partner's Information:

Name of conservatee's spouse or registered domestic partner: _____ Spouse Partner

Date of marriage or partnership: _____ Deceased (date of death): _____

Street or mailing address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Name of employer (if none, so state): _____

Employer's address: _____ State: _____ Zip: _____

The conservatee's spouse or partner is is not managing, or following appointment of a conservator is planning to manage, some or all of the couple's community property outside the conservatorship estate.

If you selected "is" above: The income, money, and property shown on page 4 includes does not include the income and property managed, or expected to be managed, by the spouse/partner outside the estate.

Divorced (date of final judgment or decree): _____

Court: _____

Case Number: _____ Support order for conservatee? No Yes

Date of support order (if multiple, date of latest): _____ Monthly amount: _____

13 The Conservatee and Trusts:

The conservatee:

a. is is not a trustor or settlor of a trust.

b. is is not a beneficiary of a trust.

If you selected "Is" to complete any of the above statements, identify and provide, in an attachment to this Request, the current address and telephone number of the current trustee(s) of each trust, describe the general terms of and value of each trust and the nature and value of the conservatee's interest in each trust, and the amount(s) and frequency of any distributions to or for the benefit of the conservatee prior to your appointment as conservator of which you are aware. (You may use Judicial Council form MC-025 for this purpose.)

All applicants who checked item 8b or item 8c on page 2 must continue to and follow the instructions for completion of items 14–16 or items 14–18 on page 4, before signing below.

The information I have provided on this form and all attachments about the (proposed) ward or conservatee is true and correct to the best of my information and belief. The information I have provided on this form and all attachments concerning myself is true and correct. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: 07/26/2024

Mary Doe

Print your name here

Mary Doe
Sign here



Name of (Proposed) Ward or Conservatee:

John Doe

Case Number:

If you checked 8a on page 2, do not fill out below. If you checked 8b, you must answer questions 14–16. If you checked 8c, you must answer questions 14–18. If you need more space, attach form MC-025 or attach a sheet of paper, and write "Financial Information" and the ward's or conservatee's name and case number at the top.

14 Check here if the ward's or conservatee's income changes a lot from month to month. If it does, complete the form based on their average income for the past 12 months.

15 Ward's or Conservatee's Gross Monthly Income

a. List the source and amount of any income the ward or conservatee gets each month, including: wages or other income from work before deductions, spousal/child support, retirement, social security, disability, unemployment, military basic allowance for quarters (BAQ), veterans payments, dividends, interest, trust income, annuities, net business or rental income, reimbursement for job-related expenses, gambling or lottery winnings, etc.

- (1) \$
(2) \$
(3) \$
(4) \$
(5) \$

b. Total monthly income: \$

16 Ward's or Conservatee's Household's Income

a. List the income of all other persons living in the ward's or conservatee's home who depend in whole or in part on them for support, or on whom they depend in whole or in part for support.

Table with columns: Name, Age, Relationship, Gross Monthly Income. Rows 1-10.

b. Total monthly income of persons above: \$

Total monthly income and household income (15b plus 16b): \$

17 Ward's or Conservatee's Household's Money and Property

a. Cash \$

b. All financial accounts (list bank name and amount):

- (1) \$
(2) \$
(3) \$

c. Cars, boats, and other vehicles

Table with columns: Make / Year, Fair Market Value, How Much You Still Owe. Rows 1-3.

d. Real estate

Table with columns: Address, Fair Market Value, How Much You Still Owe. Rows 1-2.

e. Other personal property (jewelry, furniture, furs, stocks, bonds, etc.):

Table with columns: Describe, Fair Market Value, How Much You Still Owe. Rows 1-2.

18 Ward's or Conservatee's Household's Monthly Deductions and Expenses

a. List any payroll deductions and the monthly amount below:

- (1) \$
(2) \$
(3) \$
(4) \$

b. Rent or house payment and maintenance \$

c. Food and household supplies \$

d. Utilities and telephone \$

e. Clothing \$

f. Laundry and cleaning \$

g. Medical and dental expenses \$

h. Insurance (life, health, accident, etc.) \$

i. School, child care \$

j. Child, spousal support (another marriage) \$

k. Transportation, gas, auto repair and insurance \$

l. Installment payments (list each below):

- Paid to:
(1) \$
(2) \$
(3) \$

m. Wages/earnings withheld by court order \$

n. Any other monthly expenses (list each below).

- Paid to: How Much?
(1) \$
(2) \$
(3) \$

Total monthly expenses (add 18a – 18n above): \$

To list any other facts you want the court to know, such as the (proposed) ward's or conservatee's unusual medical expenses, etc, attach form MC-025 or attach a sheet of paper and write "Financial Information" and the (proposed) ward's or conservatee's name and case number at the top.

Check here if you attach another page. []

Important! If the ward's or conservatee's financial situation or ability to pay court fees improves, you must notify the court within five days on form FW-010-GC.

Do not include income of guardian or conservator living in the household in item 16, their money and property in item 17, or their deductions and expenses in item 18 unless they are a parent of the ward or the spouse or registered domestic partner of the conservatee.

Clerk stamps date here when form is filed.

1 (Proposed) guardian or conservator who asked the court to waive court fees for (proposed) ward or conservatee:

Name: Mary Doe
Street or mailing address: 345 Treetop Avenue, Apt 2
City: Los Angeles State: CA Zip: 90000
Telephone: 1112223333

2 Lawyer, if person in 1 has one:

Name: In Pro Per* (Spanish Speaking Only) State Bar No: _____
Firm or Affiliation: _____
Street or mailing address: _____
City: _____ State: _____ Zip: _____
E-mail: _____ Telephone: _____

3 (Proposed) ward or conservatee:

Name: Jane Doe
Street or mailing address: 345 Treetop Avenue, Apt 2
City: Los Angeles State: CA Zip: 90000
Telephone: 1112223333

4 Lawyer for (proposed) ward or conservatee, if any:

Name: _____ State Bar No: _____
Firm or Affiliation: _____
Street or mailing address: _____
City: _____ State: _____ Zip: _____
E-mail: _____ Telephone: _____

5 A request to waive court fees was filed on (date): 07/26/2024

The court made a previous fee waiver order in this case on (date): _____

Fill in court name and street address:

**Superior Court of California, County of
LOS ANGELES**
111 North Hill Street
Los Angeles CA 90012

Downtown Los Angeles

Fill in case number and name:

Case Number:

Case Name:

Guardianship of Jane Doe and John Doe

Read this form carefully. All checked boxes are court orders.

Notice: The court may order you to answer questions about the ward's or conservatee's finances after granting a waiver and may later order payment of the waived fees from his or her estate. If this happens and the fees are not paid, the court can also charge collection fees. The court may also direct you to make efforts to collect money to pay back waived fees from persons who owe a duty to support the ward or conservatee. If there is a change in the ward's or conservatee's financial circumstances during this case that increases his or her ability to pay fees and costs, you must notify the trial court within five days. (Use form FW-010-GC.)

If this case is an action against another party and you win the case on behalf of the ward or conservatee, the trial court may order the other side to pay some or all of the waived fees. If you settle the matter for **\$10,000** or more, the trial court will have a lien on the settlement in the amount of the waived fees. The trial court may not dismiss the case until the lien is paid.

The court may also have a lien against the ward's or conservatee's estate that must be paid before the estate is distributed, the guardianship or conservatorship proceeding is concluded, and you are discharged as guardian or conservator.

6 After reviewing your: Request to Waive Court Fees Request to Waive Additional Court Fees

the court makes the following orders:

a. The court **grants** your request concerning the ward's or conservatee's court fees and costs, as follows:

(1) **Fee Waiver.** The court grants your request and waives the fees and costs listed below.

(Cal. Rules of Court, rules 3.55 and 8.818.) You do not have to pay the court fees for the following:

- Filing papers in superior court
- Making copies and certifying copies
- Sheriff's fee to give notice
- Court fee for phone hearing
- Giving notice and certificates
- Sending papers to another court department

(List continued on next page.)



Name of (Proposed) Ward or Conservatee:

Case Number:

Jane Doe

- 6 a. (1)
 - Reporter’s fee for attendance at hearing or trial, if you request that the court provide an official reporter
 - Assessment for court investigations under Probate Code section 1513, 1826, or 1851
 - Preparing, certifying, copying, and sending the clerk’s transcript on appeal
 - Holding in trust the deposit for a reporter’s transcript on appeal under rule 8.130 or 8.834
 - Making a transcript or copy of an official electronic recording under rule 8.835

(2) **Additional Fee Waiver.** The court grants your request and waives the additional superior court fees and costs that are checked below. (*Cal. Rules of Court, rule 3.56.*) You do not have to pay for the checked items.

- | | |
|---|---|
| <input type="checkbox"/> Jury fees and expenses | <input type="checkbox"/> Fees for a peace officer to testify in court |
| <input type="checkbox"/> Fees for court-appointed experts | <input type="checkbox"/> Court-appointed interpreter fees for a witness |
| <input type="checkbox"/> Other (<i>specify</i>): _____ | |

b. The court **denies** your fee waiver request, as follows:

Warning! If you miss the deadline below, the court cannot process your request for hearing or the court papers you filed with your original request. If the papers were a notice of appeal, the appeal may be dismissed.

(1) The court **denies** your request because it is incomplete. You have **10 days** after the clerk gives notice of this order (see date of service on next page) to:

- Pay the ward’s or conservatee’s fees and costs, or
- File a new revised request that includes the items listed: Below On Attachment 6b(1)

(2) The court **denies** your request because the information you provided on the request shows that the ward or conservatee is not eligible for the fee waiver for the reasons specified:

- Below On Attachment 6b(2)

The court has enclosed a blank *Request for Hearing About Court Fee Waiver Order (Ward or Conservatee)(Superior Court)* (form FW-006-GC). You have **10 days** after the clerk gives notice of this order (see date of service on next page) to:

- Pay the fees and costs in full or the amount listed in c below, or
- Ask for a hearing in order to show the court more information. (*Use form FW-006-GC to request hearing.*)

c. (1) The court needs more information to decide whether to grant your request. You must go to court on the date on page 3. The hearing will be about questions regarding your eligibility specified:

- Below On Attachment 6c(1)

(2) Bring the items of proof to support your request, if reasonably available, that are listed:

- Below On Attachment 6c(2)




Name of (Proposed) Ward or Conservatee:

Jane Doe

Case Number:

Warning! If item c is checked, and you do not go to court on your hearing date, the judge will deny your request to waive court fees, and you will have 10 days to pay the ward's or conservatee's fees. If you miss that deadline, the court cannot process the court papers you filed with your request. If the papers were a notice of appeal, the appeal may be dismissed.

NOTE TO GUARDIAN or CONSERVATOR: If there are unpaid court fees after a denial of a request for a fee waiver, your case—including the guardianship or conservatorship proceeding if the waiver is requested in that matter—might not go forward. After a denial, you may choose to advance the court costs yourself to ensure that the case proceeds. If you or another person is appointed as guardian or conservator, you would have an opportunity to be reimbursed for such advances from the assets of the guardianship or conservatorship estate, if any, as allowable expenses of administration. You might also have the right to reimbursement for advanced court costs from persons with an obligation to support the ward or conservatee from assets not part of his or her estate, such as a parent of the ward, the spouse or registered domestic partner of the conservatee who is managing the couple's community property outside the conservatorship estate, or the trustee of a trust of which the conservatee is a beneficiary.

	Date: _____	Time: _____	Name and address of court if different from above: _____ _____ _____ _____
	Dept.: _____	Room: _____	

Date: _____



Signature of (check one): Judicial Officer Clerk, Deputy



Request for Accommodations. Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least 5 days before your hearing. Contact the clerk's office for *Request for Accommodation*, Form MC-410. (Civil Code, § 54.8.)

Clerk's Certificate of Service

I certify that I am not involved in this case and (check one):

- I handed a copy of this Order to the party and attorney, if any, listed in ① and ②, at the court, on the date below.
- This order was mailed first class, postage paid, to the party and attorney, if any, at the addresses listed in ① and ②, from (city): _____, California, on the date below.
- A certificate of mailing is attached.

Date: _____

Clerk, by _____, Deputy
Name: _____

This is a Court Order.

Clerk stamps date here when form is filed.

1 (Proposed) guardian or conservator who asked the court to waive court fees for (proposed) ward or conservatee:Name: Mary DoeStreet or mailing address: 345 Treetop Avenue, Apt 2City: Los Angeles State: CA Zip: 90000Telephone: 111-222-3333**2 Lawyer, if person in 1 has one:**Name: In Pro Per* (Spanish Speaking Only) State Bar No: _____

Firm or Affiliation: _____

Street or mailing address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Telephone: _____

3 (Proposed) ward or conservatee:Name: John DoeStreet or mailing address: 345 Treetop Avenue, Apt 2City: Los Angeles State: CA Zip: 90000Telephone: 111-222-3333**4 Lawyer for (proposed) ward or conservatee, if any:**

Name: _____ State Bar No: _____

Firm or Affiliation: _____

Street or mailing address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Telephone: _____

5 A request to waive court fees was filed on (date): 07/26/2024 The court made a previous fee waiver order in this case on (date): _____

Fill in court name and street address:

**Superior Court of California, County of
LOS ANGELES****111 North Hill Street
Los Angeles CA 90012****Downtown Los Angeles**

Fill in case number and name:

Case Number:**Case Name:****Guardianship of Jane Doe and John Doe****Read this form carefully. All checked boxes are court orders.**

Notice: The court may order you to answer questions about the ward's or conservatee's finances after granting a waiver and may later order payment of the waived fees from his or her estate. If this happens and the fees are not paid, the court can also charge collection fees. The court may also direct you to make efforts to collect money to pay back waived fees from persons who owe a duty to support the ward or conservatee. If there is a change in the ward's or conservatee's financial circumstances during this case that increases his or her ability to pay fees and costs, you must notify the trial court within five days. (Use form FW-010-GC.)

If this case is an action against another party and you win the case on behalf of the ward or conservatee, the trial court may order the other side to pay some or all of the waived fees. If you settle the matter for **\$10,000** or more, the trial court will have a lien on the settlement in the amount of the waived fees. The trial court may not dismiss the case until the lien is paid.

The court may also have a lien against the ward's or conservatee's estate that must be paid before the estate is distributed, the guardianship or conservatorship proceeding is concluded, and you are discharged as guardian or conservator.

6 After reviewing your: Request to Waive Court Fees Request to Waive Additional Court Fees**the court makes the following orders:**a. The court **grants** your request concerning the ward's or conservatee's court fees and costs, as follows:(1) **Fee Waiver.** The court grants your request and waives the fees and costs listed below.*(Cal. Rules of Court, rules 3.55 and 8.818.)* You do not have to pay the court fees for the following:

- Filing papers in superior court
- Making copies and certifying copies
- Sheriff's fee to give notice
- Court fee for phone hearing
- Giving notice and certificates
- Sending papers to another court department

(List continued on next page.)

Name of (Proposed) Ward or Conservatee:

Case Number:

John Doe

- 6 a. (1)
 - Reporter’s fee for attendance at hearing or trial, if you request that the court provide an official reporter
 - Assessment for court investigations under Probate Code section 1513, 1826, or 1851
 - Preparing, certifying, copying, and sending the clerk’s transcript on appeal
 - Holding in trust the deposit for a reporter’s transcript on appeal under rule 8.130 or 8.834
 - Making a transcript or copy of an official electronic recording under rule 8.835

(2) **Additional Fee Waiver.** The court grants your request and waives the additional superior court fees and costs that are checked below. (*Cal. Rules of Court, rule 3.56.*) You do not have to pay for the checked items.

- | | |
|---|---|
| <input type="checkbox"/> Jury fees and expenses | <input type="checkbox"/> Fees for a peace officer to testify in court |
| <input type="checkbox"/> Fees for court-appointed experts | <input type="checkbox"/> Court-appointed interpreter fees for a witness |
| <input type="checkbox"/> Other (<i>specify</i>): _____ | |

b. The court **denies** your fee waiver request, as follows:

Warning! If you miss the deadline below, the court cannot process your request for hearing or the court papers you filed with your original request. If the papers were a notice of appeal, the appeal may be dismissed.

(1) The court **denies** your request because it is incomplete. You have **10 days** after the clerk gives notice of this order (see date of service on next page) to:

- Pay the ward’s or conservatee’s fees and costs, or
- File a new revised request that includes the items listed: Below On Attachment 6b(1)

(2) The court **denies** your request because the information you provided on the request shows that the ward or conservatee is not eligible for the fee waiver for the reasons specified:

Below On Attachment 6b(2)

The court has enclosed a blank *Request for Hearing About Court Fee Waiver Order (Ward or Conservatee)(Superior Court)* (form FW-006-GC). You have **10 days** after the clerk gives notice of this order (see date of service on next page) to:

- Pay the fees and costs in full or the amount listed in c below, or
- Ask for a hearing in order to show the court more information. (*Use form FW-006-GC to request hearing.*)

c. (1) The court needs more information to decide whether to grant your request. You must go to court on the date on page 3. The hearing will be about questions regarding your eligibility specified:

Below On Attachment 6c(1)

(2) Bring the items of proof to support your request, if reasonably available, that are listed:

Below On Attachment 6c(2)




Name of (Proposed) Ward or Conservatee:

John Doe

Case Number:

Warning! If item c is checked, and you do not go to court on your hearing date, the judge will deny your request to waive court fees, and you will have 10 days to pay the ward's or conservatee's fees. If you miss that deadline, the court cannot process the court papers you filed with your request. If the papers were a notice of appeal, the appeal may be dismissed.

NOTE TO GUARDIAN or CONSERVATOR: If there are unpaid court fees after a denial of a request for a fee waiver, your case—including the guardianship or conservatorship proceeding if the waiver is requested in that matter—might not go forward. After a denial, you may choose to advance the court costs yourself to ensure that the case proceeds. If you or another person is appointed as guardian or conservator, you would have an opportunity to be reimbursed for such advances from the assets of the guardianship or conservatorship estate, if any, as allowable expenses of administration. You might also have the right to reimbursement for advanced court costs from persons with an obligation to support the ward or conservatee from assets not part of his or her estate, such as a parent of the ward, the spouse or registered domestic partner of the conservatee who is managing the couple's community property outside the conservatorship estate, or the trustee of a trust of which the conservatee is a beneficiary.

	Date: _____	Time: _____	Name and address of court if different from above: _____ _____ _____ _____
	Dept.: _____	Room: _____	

Date: _____



Signature of (check one): Judicial Officer Clerk, Deputy



Request for Accommodations. Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least 5 days before your hearing. Contact the clerk's office for *Request for Accommodation*, Form MC-410. (Civil Code, § 54.8.)

Clerk's Certificate of Service

I certify that I am not involved in this case and (check one):

- I handed a copy of this Order to the party and attorney, if any, listed in ① and ②, at the court, on the date below.
- This order was mailed first class, postage paid, to the party and attorney, if any, at the addresses listed in ① and ②, from (city): _____, California, on the date below.
- A certificate of mailing is attached.

Date: _____

Clerk, by _____, Deputy
Name: _____

This is a Court Order.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): Mary Doe 345 Treetop Avenue, Apt 2 Los Angeles CA 90000	TELEPHONE AND FAX NOS.: 1112223333	FOR COURT USE ONLY
ATTORNEY FOR (Name): In Pro Per* (Spanish Speaking Only)		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Downtown Los Angeles		
<input type="checkbox"/> ESTATE OF <input checked="" type="checkbox"/> GUARDIANSHIP OF <input type="checkbox"/> CONSERVATORSHIP OF (Name): Jane Doe and John Doe		
<input type="checkbox"/> DECEDENT <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> CONSERVATEE		
ORDER PRESCRIBING NOTICE (PROBATE)		CASE NUMBER:

THE COURT ORDERS

1. The time and place of hearing* on the petition for
- a. compensation on account (Prob. Code, §§ 8547(d), 10830)
 - b. authority to continue decedent's business (Prob. Code, §§ 9760-9763)
 - c. order vacating order confirming sale (Prob. Code, §§ 10350, 10351)
 - d. court authorization for medical treatment (Prob. Code, §§ 2357(c), 3201)
 - e. appointment of a limited conservator (Prob. Code, § 1822)
 - f. other (specify): **Notice of Hearing and Petition for Appointment of Guardian of Minor**

(hearing) is set for

Date:	Time:	Dept.:	Room:
-------	-------	--------	-------

Address of court: same as noted above other (specify):

2. Petitioner shall cause notice of the hearing to be **PETITION FOR APPOINTMENT OF GUARDIAN OF MINOR**

- a. served at least (specify): **15** days before hearing personally upon (name):
1. Mother, 2. Father, and 3. Minor(s) over 12 years old
- b. mailed at least (specify): **15** days before hearing, in the manner prescribed by Probate Code section 1215 to the persons listed below listed on Attachment 2b.

<u>Name</u> 1) Department of Children & Family Services 2) All second degree relatives, which includes: grandparents (maternal and paternal), brothers and sisters over the age of 12	<u>Address</u> ATTN: Guardianship Section 201 Centre Plaza Drive, Monterey Park, CA 91754
---	---

- c. (for limited conservatorship only) mailed to the regional center identified in Probate Code section 1827.5.

Date:

 JUDGE OF THE SUPERIOR COURT

SIGNATURE FOLLOWS LAST ATTACHMENT

* This form is not sufficient as Notice of Hearing.

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NO.: NAME: Mary Doe FIRM NAME: STREET ADDRESS: 345 Treetop Avenue, Apt 2 CITY: Los Angeles STATE: CA ZIP CODE: 90000 TELEPHONE NO.: 1112223333 FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): In Pro Per* (Spanish Speaking Only)	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Downtown Los Angeles	
GUARDIANSHIP OF (name): Jane Doe and John Doe	CASE NUMBER:
PETITION FOR APPOINTMENT OF GUARDIAN OF <input type="checkbox"/> MINOR* <input checked="" type="checkbox"/> MINORS* <input checked="" type="checkbox"/> Person** <input type="checkbox"/> Estate**	HEARING DATE AND TIME: DEPT.:

1. **Petitioner (name each):** Mary Doe

requests that

- a. (name): **Mary Doe** **Gary Doe**
 (address): **345 Treetop Avenue, Apt 2, Los Angeles, CA 90000** **345 Treetop Avenue, Apt 2, Los Angeles, CA 90000**
 (telephone): **1112223333** **1112223333**
 be appointed guardian of the PERSON of the minor or minors named in item 2 and *Letters* issue upon qualification.
- b. (Not applicable to proposed wards 18 years of age and older.)
 (name):
 (address):
 (telephone):
 be appointed guardian of the ESTATE of the minor or minors named in item 2 and *Letters* issue upon qualification.
- c. (1) bond not be required because the petition is for guardian of the person only because the proposed guardian is a corporate fiduciary or an exempt government agency for the reasons stated in Attachment 1c.
 (2) \$ bond be fixed. It will be furnished by an authorized surety company or as otherwise provided by law. (Specify reasons in Attachment 1c if the amount is different from the minimum required by Prob. Code, § 8482.)
 (3) \$ in deposits in a blocked account be allowed. Receipts will be filed. (Specify institution and location):
- d. authorization be granted under Probate Code section 2590 to exercise the powers specified in Attachment 9.
- e. orders relating to the powers and duties of the proposed guardian of the person under Probate Code sections 2351–2358 be granted (specify orders, facts, and reasons in Attachment 1e).
- f. an order dispensing with notice to the persons named in Attachment 10 be granted.
- g. other orders be granted (specify in Attachment 1g).

2. Attached is a copy of *Guardianship Petition—Child Information Attachment* (form GC-210(CA)) for each minor for whom this petition requests the appointment of a guardian. The full legal name and date of birth of each minor is:

- a. Name: **Jane Doe** Date of Birth (month/day/year): **10/24/03**
- b. Name: **John Doe** Date of Birth (month/day/year): **06/21/05**
- c. Name: Date of Birth (month/day/year):
- d. Name: Date of Birth (month/day/year):

The names and dates of birth of additional minors are specified on Attachment 2 to this petition.

*Under section 1510.1(d) of the Probate Code, the terms *child*, *minor*, and *ward* include a youth 18 to 20 years of age.

**You MAY use this form or form GC-210(P) for a guardianship of the person. You MUST use this form for a guardianship of the estate or of the person and estate. Do NOT use this form for a temporary guardianship.

GUARDIANSHIP OF (name):
Jane Doe and John Doe

CASE NUMBER:

3. Petitioner is
- related to the minor or minors named in item 2, as shown in item 7 of each minor's attached form GC-210(CA).
 - the minor named in item 2, who is 12 years of age or older.
 - another person on behalf of minor or minors named in item 2, as shown in item 7 of each minor's attached form GC-210(CA).
4. The proposed guardian is (check all that apply):
- a nominee (affix a copy of nomination as Attachment 4a or file Nomination of Guardian (form GC-211, items 2 and 3) with this petition.
 - related to the minor or minors named in item 2, as shown in item 3 of each minor's attached form GC-210(CA).
 - other, as shown in item 3 of each minor's attached form GC-210(CA).
 - a professional fiduciary within the meaning of the Professional Fiduciaries Act. The proposed guardian's license status is shown in item 1 on page 1 of the attached Professional Fiduciary Attachment. (Use form GC-210(A-PF)/GC-310(A-PF) for this attachment.)
5. Petitioner, with intent to adopt, has accepted or intends to accept physical care or custody of the minor.
6. A person other than the proposed guardian has been nominated as the guardian of the minor by will other writing. A copy of the nomination is affixed as Attachment 6. (Specify name and address of nominee in item 2 of minor's attached form GC-210(CA).)
7. Character and estimated value of property of the estate (complete if petition requests appointment of a guardian of the estate or the person and estate):
- Personal property: \$
 - Annual gross income from all sources, including real and personal property, wages, pensions, and public benefits: \$
 - Total:** \$ _____
 - Real property: \$
8. Appointment of a guardian of the person estate of the minor or minors named in item 2 is necessary or convenient for the following reasons:
See Attachment 8 (Form GC-210)

Continued in Attachment 8. Parental custody would be detrimental to the minor or minors named in item 2 (not applicable to proposed wards 18 years of age and older).

9. Granting the proposed guardian of the estate powers to be exercised independently under Probate Code section 2590 would be to the advantage and benefit and in the best interest of the guardianship estate. Reasons for this request and the powers requested are specified in Attachment 9.
10. Notice to the persons named in Attachment 10 should be dispensed with under Probate Code section 1511 because
- they cannot with reasonable diligence be given notice (specify names and efforts to locate in Attachment 10).
 - giving notice to them would be contrary to the interest of justice (specify names and reasons in Attachment 10).

GUARDIANSHIP OF <i>(name)</i> : Jane Doe and John Doe	CASE NUMBER:
---	--------------

11. (Complete this item if this petition is filed by a person who is not related to a minor named in item 2 and is not a petition for appointment of a guardian of the estate only.)
- a. Petitioner is the proposed guardian and will promptly furnish all information requested by any agency referred to in Probate Code section 1543.
 - b. Petitioner is not the proposed guardian. A statement by the proposed guardian that he or she will promptly furnish all information requested by any agency referred to in Probate Code section 1543 is affixed as Attachment 11b.
 - c. The proposed guardian's home is is not a licensed foster family home.
 - d. The proposed guardian has never filed a petition for adoption of the minor except as specified in Attachment 11d.

12. Attached to this petition is a *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form GC-120) concerning each child under 18 years of age listed in item 2 (*guardianship of the person or person and estate only*).

13. Filed with this petition are the following (*check all that apply*):

- Consent of Proposed Guardian* (form GC-211, item 1)
- Nomination of Guardian* (form GC-211, items 2 and 3)
- Consent to Appointment of Guardian and Waiver of Notice* (form GC-211, item 4)
- Petition for Appointment of Temporary Guardian* (form GC-110)
- Petition for Appointment of Temporary Guardian of the Person* (form GC-110(P))
- Confidential Guardianship Screening Form* (form GC-212)
- Petition for Special Immigrant Juvenile Findings* (form GC-220)

Other (*specify*):

14. All attachments to this form are incorporated by this reference as though placed here in this form. Number of pages attached: **1**

Date: _____
 (SIGNATURE OF ATTORNEY*)

***(All petitioners and the proposed ward—if he or she is at least 18 years of age but not yet 21 and not a petitioner—must also sign.)**

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

Date: **07/26/2024**

Mary Doe _____
 (TYPE OR PRINT NAME)

▶ *Mary Doe* _____
 (SIGNATURE OF PETITIONER)

 (TYPE OR PRINT NAME)

▶ _____
 (SIGNATURE OF PETITIONER)

 (TYPE OR PRINT NAME)

▶ _____
 (SIGNATURE OF PETITIONER)

I consent to the appointment of the person named in item 1.a as guardian of my person and to his or her performance of the duties of a guardian on my behalf.

Date: _____
 (TYPE OR PRINT NAME)

▶ _____
 (SIGNATURE OF PROPOSED WARD)

SHORT TITLE: — Guardianship of Jane Doe and John Doe	CASE NUMBER:
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ATTACHMENT (Number): 4 and 8

(This Attachment may be used with any Judicial Council form.)

The minors, Jane and John, have lived with Mary and Gary, their paternal grandparents, since 2005 when John was a baby. Initially, the minors' mother and father lived in the house as well. However, when John was just a year old their mother left the home and did not return. The father alleges the mother was dealing with substance abuse before she left. Jane and John have grown up in their grandparents home with their father in their lives.

In August of this year, their father was deported to Mexico. Prior to his departure, he left a notarized letter leaving Gary and Mary responsible for the children. The minors have a stable and healthy home with their grandparents and have expressed their preference to remain in the home they have always known. Although they miss their father the minors agree with their father they should stay in the United States to continue with their education.

Mary and Gary Doe need legal guardianship at this time. They need the authority to make legal medical and educational decisions for their grandchildren. They also need to be authorized to receive public benefits for the children, previously under their father's name. They ask that the court grant legal guardianship so that they can continue to care for their children and give them a safe and stable home.

They do not know the mother's whereabouts and have not had any contact with her since 2005. The maternal grandparents have not been in the children's lives. The father indicated that they lived in Los Angeles at one time but they may have moved to Nevada.

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page _____ of _____

(Add pages as required)

Case Number: _____

Guardianship of (all children's names): Jane Doe and John Doe

This child's name: Jane Doe

Fill out a separate copy of this form for **each child** for whom your petition asks the court to appoint a guardian.

This form is attached to the Petition, **form GC-210, item 2,** or **form GC-210(P), item 8.**

The petition asks the court to appoint a guardian of this child's (specify): person estate person and estate.

1 Tell the court about this child

a. Child's full legal name: Jane Doe Date of birth: 05/31/07
First Middle Last mm/dd/yyyy

b. Child's current address: 345 Treetop Avenue, Apt 2, Los Angeles, CA 90000

c. Indian child inquiry (Complete only if your petition asks the court to appoint a guardian of this child's person or person and estate. If your petition asks the court to appoint a guardian of this child's estate only, skip this item and go to item 1d.)

- I have asked whether the child is or may be a member of one or more Indian tribes recognized by the federal government, or eligible for membership in such a tribe and the biological child of a tribal member, and whether the child or parents live or are domiciled on a reservation or rancheria or in an Alaskan Native village. Form ICWA-010(A), *Indian Child Inquiry Attachment*, is attached to this form.
- I have not asked about the child's Indian heritage because the parents are unavailable or deceased.

(For more information about your duties under the federal Indian Child Welfare Act (ICWA) (25 U.S.C. §§ 1901–1963) and California law, including making the inquiry and completing form ICWA-010(A) if the child is or may be an Indian child, see Information Sheet on Indian Child Inquiry Attachment and Notice of Child Custody Proceeding for Indian Child (form ICWA-005-INFO).)

d. Is this child married? Yes No Never married If you checked "No," was this child married in the past but the marriage was dissolved or ended in divorce? Yes No
(The court cannot appoint a guardian of the person for a minor child who is married or whose marriage was dissolved or ended in divorce.)

e. Is this child receiving public benefits? Yes No I don't know (If you checked "Yes," fill in below.)

Type of Aid	Monthly Benefit	Type of Aid	Monthly Benefit
<input type="checkbox"/> TANF (Temporary Asst. for Needy Families)	\$	<input checked="" type="checkbox"/> Other (explain): Food Stamps	\$150
<input type="checkbox"/> Social Security	\$	<input type="checkbox"/> Other (explain):	\$
<input type="checkbox"/> Dept. Veterans Affairs Benefits	\$		

f. Name and address of the person with legal custody of this child: Santiago Doe
Mexico

g. (Check this box and fill out below if the person the child lives with is **not** the person in f. with legal custody.)
Name and address of the person this child lives with (who takes care of the child): Mary Doe and Gary Doe
345 Treetop Avenue, Apt 2, Los Angeles, CA 90000



Guardianship of (all children's names): Jane Doe and John Doe

Case Number: _____

This child's name: Jane Doe

1 Tell the court about this child (continued)

h. (Check this box if this child has been involved in an adoption, juvenile court, marriage dissolution (divorce), domestic relations, child custody, or other similar court case.) Describe the court case below:

Type of Case	Court District or County and State or Tribe	Case Number (if known)
Juvenile Court (Dependency)	Children's Court, California, Monterey Park	CK65882

i. (Check this box if this child is in or on leave from an institution supervised by the California Department of Developmental Services or the California Department of State Hospitals.) Write the name of the institution here:

2 List the names and addresses of this child's relatives and all other persons shown below:

Relationship	Name	Home Address (Street, City, State, Zip)
Mother	Adriana Gomez	Unknown
Father	Santiago Doe	Mexico
Grandmother (Mother's mother)	Stella Gomez	Unknown
Grandfather (Mother's father)	Edgar Gomez	Unknown
Grandmother (Father's mother)	Mary Doe	345 Treetop Avenue, Apt 2, Los Angeles, CA 90000
Grandfather (Father's father)	Gary Doe	345 Treetop Avenue, Apt 2, Los Angeles, CA 90000
Sibling	John Doe	345 Treetop Avenue, Apt 2, Los Angeles, CA 90000
Sibling	Javier Doe	Address currently unknown but will be provided.
Sibling		
Sibling		
Sibling		
Sibling		
Sibling		

(Check here if this child has additional relatives, including parents, grandparents, siblings, or half-siblings, and list their names and addresses on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Item 2: Other Relatives" at the top of the paper and attach it to this form.)



This child's name: Jane Doe**2 List the names and addresses of this child's relatives and all other persons shown below:**

Relationship	Name	Home Address (Street, City, State, Zip)
Spouse <i>(Guardianship of the estate only)</i>	_____	_____
Person nominated as guardian of this child <i>(if someone other than a proposed guardian named in 3)</i>	_____	_____
Indian custodian <i>(if any)</i>	_____	_____
Child's tribe <i>(if any and if known)</i>	_____	_____
<input type="checkbox"/> <i>(Check here if there is more than one tribe that the child may be eligible for membership in, and list the names and addresses on a separate sheet of paper. Write "Form GC-210(CA)," the name of the child, and "Attachment 2: Child's tribes" at the top of the paper and attach it to this form.)</i>		

3 Information about the proposed guardian:

- a. Name *(name all proposed guardians if more than one)*:
Mary Doe and Gary Doe
- b. Relationship(s) to the child named in 1 *(check all that apply)*:
- Relative *(specify relationship(s) to the child of each proposed relative guardian)*:
Grandmother (on father's side) (Mary Doe); Grandfather (on father's side) (Gary Doe)
- Not a relative *(explain interest in or connection to this child)*: _____
- c. Did the child's parent(s) nominate the proposed guardian(s)? Yes No I don't know
(If you checked "Yes," attach the written nomination as Attachment 3c.)
- d. Does this child currently live with the proposed guardian(s)? Yes No I don't know
If "Yes," how long has the child lived with the proposed guardian(s)? *(years, months)*: 1 year, 2 months
- e. If the court approves the guardianship, will this child live with the proposed guardian(s)? Yes No
- f. Does/do the proposed guardian(s) currently plan to adopt this child? Yes No I don't know

4 Explain why appointing a guardian for the child named in 1 would be in the child's best interest:

(Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Attachment 4: Guardianship—Best Interest of Child" at the top of the paper and attach it to this form.)



This child's name: Jane Doe

5 Explain why appointing the person named in **3** to be this child's guardian would be in the child's best interest:
See Attachment 8 (Form GC-210)

(Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Attachment 5: Proposed Guardian—Best Interest of Child" at the top of the paper and attach it to this form.)

6 a. Does one or do both of this child's parents agree:

(1) That the court needs to appoint a guardian for the child?

Parent (name): Santiago Doe Yes No I don't know

Parent (name): Adriana Gomez Yes No I don't know

(2) That the person named in **3** should be the child's guardian?

Parent (name): Santiago Doe Yes No I don't know

Parent (name): Adriana Gomez Yes No I don't know

b. If the child is an Indian child and in the care and custody of an Indian custodian, does the Indian custodian agree:

(1) That the court needs to appoint a guardian for the child?

Custodian (name): _____ Yes No I don't know

(2) That the person named in **3** should be the child's guardian?

Custodian (name): _____ Yes No I don't know

7 **Check this box if you (the petitioner) are not the person named in 3, and fill in below.**

Your relationship to this child:

Relative (specify relationship): _____

Not a relative (explain your interest in or connection to this child):

8 Except as otherwise stated in this form, the statements made in the petition to which this form is attached fully apply to this child.

1 Form GC-210(CA): John Doe Attachment 8c(1)--Indian Child Inquiry

2 The names, relationships to the child named above, addresses, and telephone numbers, of the persons
3 interviewed by Petitioner to collect or confirm the information provided on the GC-210(CA), and the date or dates
4 the interviews took place, are provided below:

4 Jane Doe
5 Child
6 345 Treetop Avenue, Apt 2, Los Angeles, CA 90000
7 (111) 222-3333
8 Contacted on November 20, 2020

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26 *(Required for verified pleading)* The items on this page stated on information and belief are *(specify item numbers, not line numbers)*:

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Guardianship of (all children's names): Jane Doe and John Doe

This child's name: John Doe

Fill out a separate copy of this form for **each child** for whom your petition asks the court to appoint a guardian.

This form is attached to the Petition, **form GC-210, item 2,** or **form GC-210(P), item 8.**

The petition asks the court to appoint a guardian of this child's (specify): person estate person and estate.

1 Tell the court about this child

a. Child's full legal name: John Doe Date of birth: 06/21/09
First Middle Last mm/dd/yyyy

b. Child's current address: 345 Treetop Avenue, Apt 2, Los Angeles, CA 90000

c. Indian child inquiry (Complete only if your petition asks the court to appoint a guardian of this child's person or person and estate. If your petition asks the court to appoint a guardian of this child's estate only, skip this item and go to item 1d.)

I have asked whether the child is or may be a member of one or more Indian tribes recognized by the federal government, or eligible for membership in such a tribe and the biological child of a tribal member, and whether the child or parents live or are domiciled on a reservation or rancheria or in an Alaskan Native village. Form ICWA-010(A), *Indian Child Inquiry Attachment*, is attached to this form.

I have not asked about the child's Indian heritage because the parents are unavailable or deceased.

(For more information about your duties under the federal Indian Child Welfare Act (ICWA) (25 U.S.C. §§ 1901–1963) and California law, including making the inquiry and completing form ICWA-010(A) if the child is or may be an Indian child, see Information Sheet on Indian Child Inquiry Attachment and Notice of Child Custody Proceeding for Indian Child (form ICWA-005-INFO).)

d. Is this child married? Yes No Never married If you checked "No," was this child married in the past but the marriage was dissolved or ended in divorce? Yes No
(The court cannot appoint a guardian of the person for a minor child who is married or whose marriage was dissolved or ended in divorce.)

e. Is this child receiving public benefits? Yes No I don't know (If you checked "Yes," fill in below.)

Type of Aid	Monthly Benefit	Type of Aid	Monthly Benefit
<input type="checkbox"/> TANF (Temporary Asst. for Needy Families)	\$	<input checked="" type="checkbox"/> Other (explain): Food Stamps	\$150
<input type="checkbox"/> Social Security	\$	<input type="checkbox"/> Other (explain):	\$
<input type="checkbox"/> Dept. Veterans Affairs Benefits	\$		

f. Name and address of the person with legal custody of this child: Santiago Doe
Mexico

g. (Check this box and fill out below if the person the child lives with is **not** the person in f. with legal custody.)
Name and address of the person this child lives with (who takes care of the child): Mary Doe and Gary Doe
345 Treetop Avenue, Apt 2, Los Angeles, CA 90000



Guardianship of (all children's names): Jane Doe and John Doe

Case Number: _____

This child's name: John Doe

1 Tell the court about this child (continued)

h. (Check this box if this child has been involved in an adoption, juvenile court, marriage dissolution (divorce), domestic relations, child custody, or other similar court case.) Describe the court case below:

Type of Case	Court District or County and State or Tribe	Case Number (if known)
Juvenile Court (Dependency)	Children's Court, California, Monterey Park	CK65882

i. (Check this box if this child is in or on leave from an institution supervised by the California Department of Developmental Services or the California Department of State Hospitals.) Write the name of the institution here:

2 List the names and addresses of this child's relatives and all other persons shown below:

Relationship	Name	Home Address (Street, City, State, Zip)
Mother	Adriana Gomez	Unknown
Father	Santiago Doe	Mexico
Grandmother (Mother's mother)	Stella Gomez	Unknown
Grandfather (Mother's father)	Edgar Gomez	Unknown
Grandmother (Father's mother)	Mary Doe	345 Treetop Avenue, Apt 2, Los Angeles, CA 90000
Grandfather (Father's father)	Gary Doe	345 Treetop Avenue, Apt 2, Los Angeles, CA 90000
Sibling	John Doe	345 Treetop Avenue, Apt 2, Los Angeles, CA 90000
Sibling	Javier Doe	Address currently unknown but will be provided.
Sibling		
Sibling		
Sibling		
Sibling		
Sibling		

(Check here if this child has additional relatives, including parents, grandparents, siblings, or half-siblings, and list their names and addresses on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Item 2: Other Relatives" at the top of the paper and attach it to this form.)



This child's name: Jane Doe**2 List the names and addresses of this child's relatives and all other persons shown below:**

Relationship	Name	Home Address (Street, City, State, Zip)
Spouse <i>(Guardianship of the estate only)</i>	_____	_____
Person nominated as guardian of this child <i>(if someone other than a proposed guardian named in 3)</i>	_____	_____
Indian custodian <i>(if any)</i>	_____	_____
Child's tribe <i>(if any and if known)</i>	_____	_____
<input type="checkbox"/> <i>(Check here if there is more than one tribe that the child may be eligible for membership in, and list the names and addresses on a separate sheet of paper. Write "Form GC-210(CA)," the name of the child, and "Attachment 2: Child's tribes" at the top of the paper and attach it to this form.)</i>		

3 Information about the proposed guardian:

- a. Name *(name all proposed guardians if more than one)*:
Mary Doe and Gary Doe
- b. Relationship(s) to the child named in 1 *(check all that apply)*:
- Relative *(specify relationship(s) to the child of each proposed relative guardian)*:
Grandmother (on father's side) (Mary Doe); Grandfather (on father's side) (Gary Doe)
- Not a relative *(explain interest in or connection to this child)*: _____
- c. Did the child's parent(s) nominate the proposed guardian(s)? Yes No I don't know
(If you checked "Yes," attach the written nomination as Attachment 3c.)
- d. Does this child currently live with the proposed guardian(s)? Yes No I don't know
If "Yes," how long has the child lived with the proposed guardian(s)? *(years, months)*: 1 year, 2 months
- e. If the court approves the guardianship, will this child live with the proposed guardian(s)? Yes No
- f. Does/do the proposed guardian(s) currently plan to adopt this child? Yes No I don't know

4 Explain why appointing a guardian for the child named in 1 would be in the child's best interest:

(Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Attachment 4: Guardianship—Best Interest of Child" at the top of the paper and attach it to this form.)



This child's name: John Doe

5 Explain why appointing the person named in 3 to be this child's guardian would be in the child's best interest:
See Attachment 8 (Form GC-210)

(Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-210(CA)," the name of this child, and "Attachment 5: Proposed Guardian—Best Interest of Child" at the top of the paper and attach it to this form.)

6 a. Does one or do both of this child's parents agree:

(1) That the court needs to appoint a guardian for the child?

Parent (name): Santiago Doe Yes No I don't know

Parent (name): Adriana Gomez Yes No I don't know

(2) That the person named in 3 should be the child's guardian?

Parent (name): Santiago Doe Yes No I don't know

Parent (name): Adriana Gomez Yes No I don't know

b. If the child is an Indian child and in the care and custody of an Indian custodian, does the Indian custodian agree:

(1) That the court needs to appoint a guardian for the child?

Custodian (name): _____ Yes No I don't know

(2) That the person named in 3 should be the child's guardian?

Custodian (name): _____ Yes No I don't know

7 Check this box if you (the petitioner) are not the person named in 3, and fill in below.

Your relationship to this child:

Relative (specify relationship): _____

Not a relative (explain your interest in or connection to this child):

8 Except as otherwise stated in this form, the statements made in the petition to which this form is attached fully apply to this child.

SHORT TITLE: — Guardianship of Jane Doe and John Doe	CASE NUMBER:
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Form GC-210(CA): John Doe Attachment 8c(1):--Indian Child Inquiry

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The names, relationships to the child named above, addresses, and telephone numbers, of the persons interviewed by Petitioner to collect or confirm the information provided on the GC-210(CA), and the date or dates the interviews took place, are provided below:

John Doe
Child
345 Treetop Avenue, Apt 2, Los Angeles, CA 90000
1112223333
Contacted on July 26, 2024

(Required for verified pleading) The items on this page stated on information and belief are *(specify item numbers, not line numbers)*:

This page may be used with any Judicial Council form or any other paper filed with the court.

Page _____

GC-110(P)**Petition for Appointment of
Temporary Guardian of the Person**

Clerk stamps date here when form is filed.

Temporary guardianship of (all children's names): Jane Doe and John Doe

You may use this form or Petition for Appointment of Temporary Guardian or Conservator (form GC-110) to ask the court to appoint a temporary guardian of the person for a minor child. (You must use form GC-110 to ask for appointment of a temporary guardian of a minor child's estate or person and estate.) You may use this form to request appointment of a temporary guardian for one or more than one child. A petition for appointment of a (general) guardian concerning this child or these children (form GC-210 or form GC-210(P)) must have already been filed in this case or filed with this petition.

Fill in court name and street address:

Superior Court of California,
County of LOS ANGELES

111 North Hill Street
Los Angeles, CA 90012

Downtown Los Angeles

Clerk fills in case number when form is filed.

Case Number:

1 Your name (include the names of all persons who are requesting the court to appoint them or the person named in **4** as temporary guardian of the child or children named above and in **6**. All must sign this form.):

- a. Mary Doe
- b. _____

2 Your address and telephone number:

Street: 345 Treetop Avenue, Apt 2 Apt.: _____

City: Los Angeles

State: CA Zip: 90000 Phone: (111) 222-3333

3 Your lawyer (if you have one):

Name: In Pro Per * (Spanish Speaking Only) Bar No.: _____

Firm name, if any: _____

Street: _____ Suite: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax (optional): _____ E-mail (optional): _____

4 I/We want to be the temporary guardian of the child or children named in **6**. (Go to **5**.)

I/We want the person or persons named here to be the temporary guardian of the child or children named above. Tell the court about the proposed guardian(s) below.

Name(s): Mary Doe and Gary Doe

Street: 345 Treetop Avenue, Apt 2 Apt.: _____

City: Los Angeles State: CA Zip: 90000

Phone: (111) 222-3333

I am the child or one of the children named in **6** and one of the persons named in **1**. I am at least 12 years old. I want the person named here to be my temporary guardian. My date of birth is (month/day/year): _____



Temporary guardianship of (*all children's names*): Jane Doe and John Doe

Case Number: _____

5 The relationship of the proposed temporary guardian named in 1 or 4 to the child or children named in 6 is (check all that apply):

- Grandmother (father's mother) Aunt
- Grandfather (father's father) Uncle
- Grandmother (mother's mother) Brother (adult)
- Grandfather (mother's father) Sister (adult)
- Other Relative (*explain relationship to child or children*): _____

Not related to the child or children (*explain proposed guardian's interest in or connection to the child*):

6 The child or children who need a temporary guardian are:

a. Child's full legal name: Jane Doe
Child's current address: 345 Treetop Avenue, Apt 2
Los Angeles, CA 90000
Child's current phone number: (111) 222-3333

b. Child's full legal name: John Doe
Child's current address: 345 Treetop Avenue, Apt 2
Los Angeles, CA 90000
Child's current phone number: (111) 222-3333

Check here if you want a temporary guardian for additional children. Give the information asked above for each additional child on a separate sheet of paper. Write "Form GC-110(P)—Attachment 6: Additional Children" at the top of the paper and attach it to this form.

7 Why do the child or children in 6 need a temporary guardian right now?

The child or children need temporary care, maintenance, and support right now because (*explain*):

Form GC-110(P) - Attachment 7: Reasons for Appointment of Temporary Guardian

Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "GC-110(P)—Item 7: Reasons for Appointment of Temporary Guardian" at the top of the paper and attach it to this form.



Temporary guardianship of (*all children's names*): Jane Doe and John Doe

Case Number: _____

8 Do I/we believe the child or children in 6 will go to the court hearing? Yes No

9 I/We ask the court to:

- a. Appoint the person named in 1 or 4 temporary guardian of the person of the child or children named in 6 and issue Letters of Temporary Guardianship of the Person.
- b. Order that I am/we are excused from having to give notice of the hearing on this petition for appointment of temporary guardian to (*review the information given on the next page and check all items that apply below*):
 - (1) The child or children in 6.
 - (2) The child's father (*name*): Santiago Doe
 - (3) The child's mother (*name*): Adriana Gomez
 - (4) A person other than a parent who has a court order for visitation with the child (*name*): _____

Good cause exists for this request for the following reasons (*explain, and include in your explanation efforts to find a person who could not be found*): _____

The mother left the children in 2005. We have not had any communication with the mother since that time. We will attempt to find out her whereabouts but it is unlikely we will find her before the temporary hearing if at all.

The father was deported to Mexico. He is in agreement and will sign a consent form. However, we will not be able to get the consent signed before the temporary hearing.

Check here if you need more space. Continue your explanation on a separate sheet of paper. Write "Form GC-110(P)—Attachment 9: Request for a Good Cause Exception to Giving Notice" at the top of the paper and attach it to this form.

Temporary guardianship of (*all children's names*): Jane Doe and John Doe

Case Number: _____

INFORMATION ABOUT GIVING NOTICE OF THE HEARING ON YOUR PETITION AND REQUESTING A GOOD CAUSE EXCEPTION TO GIVING NOTICE

You must give at least five days advance written notice of the court hearing on your petition for appointment of a temporary guardian. The written notice must be personally delivered to (1) the child if he or she is at least 12 years old, (2) the child's parents, and (3) any person who has a valid and effective visitation order with the child. Written notice is given by delivering a filled-in copy of this petition and a filled-in copy of a *Notice of Hearing—Guardianship or Conservatorship* (form GC-020), showing the date, time, and place of the hearing and the title of this petition. See *What Is "Proof of Service" in a Guardianship?* (form GC-510) for more information on how to give notice in a guardianship and how to prove that you have given notice. The instructions in that form for personal service apply here, but the time limits for giving notice mentioned in that form do not apply to a temporary guardianship. There is much less time to complete this task when a petition for appointment of a temporary guardian is involved.

The court may waive (excuse) or change the requirement of giving notice if you can show the court good cause why an exception should be made to the requirement of giving notice. This showing may be made by completing item 9b on page 3 of this form.

If you want the court to waive notice to someone because he or she cannot be found, you must show the court that you have made reasonable efforts to find that person. See rules 7.52 and 7.1012 of the California Rules of Court for information on making reasonable efforts to find a person and on the good cause exception to notice of the hearing on a petition for appointment of a temporary guardian.

10 All attachments are made part of this form as though placed here.

There are _____ pages attached to this form. (*If none, write "0."*)

All persons named in 1 (petitioners) and their attorney (if they have one) must read and sign below.

Date: _____
Petitioner's Attorney types or prints name here *Petitioner's Attorney signs here*

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

Date: November 22, 2020 Mary Doe Mary Doe
Petitioner types or prints name here *Petitioner signs here*

Date: _____
Petitioner types or prints name here *Petitioner signs here*

SHORT TITLE: Guardianship of Jane Doe and John Doe

CASE NUMBER:

ATTACHMENT (Number): 7*(This Attachment may be used with any Judicial Council form.)*

Attachment to Form GC-110 (Petition for Appointment of Temporary Guardian)

I request an emergency guardianship for the following reason(s):

Gary and Mary Doe are requesting temporary emergency guardianship. They need to request therapy for the minors who are struggling with their father's absence. They would also like to follow up with Jane's teachers because she has been diagnosed with ADHD and they need to discuss her progress. However, the school requires legal guardianship before they will share the information.

Please grant the temporary guardianship as it would be a hardship to the children if they could not get legal rights until the permanent hearing.

The father is in agreement and they will attempt to get the signed consent from him as soon as possible. The mother has not been in communication with the family since 2005 so they will not be able to serve her before the hearing.

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page _____ of _____

(Add pages as required)

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): Mary Doe 345 Treetop Avenue, Apt 2, Los Angeles, CA 90000 TELEPHONE NO.: (111) 222-3333 FAX NO. (<i>Optional</i>): E-MAIL ADDRESS (<i>Optional</i>): ATTORNEY FOR (<i>Name</i>): In Pro Per * (Spanish Speaking Only)	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: same CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Downtown Los Angeles	
GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (<i>Name</i>): Jane Doe and John Doe	
<input checked="" type="checkbox"/> CONSENT OF PROPOSED GUARDIAN <input type="checkbox"/> NOMINATION OF GUARDIAN <input type="checkbox"/> CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE	CASE NUMBER:

CONSENT OF PROPOSED GUARDIAN

1. I consent to serve as guardian of the person estate of the minor.
 Date: November 22, 2020

 Gary Doe
 Mary Doe
 (TYPE OR PRINT NAME)

(SIGNATURE OF PROPOSED GUARDIAN)

NOMINATION OF GUARDIAN

2. I am a parent of the minor a donor of a gift to the minor. I nominate (*name and address*):
 as guardian of the person estate of the minor.

3. I am a parent of the minor a donor of a gift to the minor. I nominate (*name and address*):
 as guardian of the person estate of the minor.

Date: _____

 (TYPE OR PRINT NAME) (SIGNATURE)

NOTICE: The guardian of the person of a minor child has full legal and physical custody until the child becomes an adult or is adopted, the court changes guardians, or the court terminates the guardianship. Parents or other interested persons must petition the court to terminate the guardianship. The court will not do so unless the judge decides that termination would be in the child's best interest.

CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE

4. I consent to appointment of the guardian as requested in the *Petition for Appointment of Guardian of Minor*, filed on (*date*): November 22, 2020. I am entitled to notice in this proceeding, but I waive notice of hearing of the petition, including notice of any request for independent powers contained in it. I waive timely receipt of a copy of the petition.

<u>November 22, 2020</u> DATE	<u>Mary Doe</u> (TYPE OR PRINT NAME)	 (SIGNATURE)	<u>Grandmother (Pat.)</u> RELATIONSHIP TO MINOR
<u>November 22, 2020</u> DATE	<u>Gary Doe</u> (TYPE OR PRINT NAME)	 (SIGNATURE)	<u>Grandfather (Pat.)</u> RELATIONSHIP TO MINOR
<u>November 22, 2020</u> DATE	<u>Jane Doe</u> (TYPE OR PRINT NAME)	 (SIGNATURE)	<u>proposed ward</u> RELATIONSHIP TO MINOR

Continued on Attachment 4.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Mary Doe 345 Treetop Avenue, Apt 2 Los Angeles, CA 90000 TELEPHONE NO.: (111) 222-3333 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): In Pro Per * (Spanish Speaking Only)	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: same CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Downtown Los Angeles	
PETITIONER: <i>(This section applies only to family law cases)</i> RESPONDENT: OTHER PARTY:	
<i>(This section applies only to guardianship cases)</i> GUARDIANSHIP OF (Name): Jane Doe and John Doe Minor	CASE NUMBER:
DECLARATION UNDER UNIFORM CHILD CUSTODY JURISDICTION AND ENFORCEMENT ACT (UCCJEA)	

1. I am a party to this proceeding to determine custody of a child.
2. My present address and the present address of each child residing with me is confidential under Family Code section 3429 as I have indicated in item 3.
3. There are (specify number): 2 minor children who are subject to this proceeding, as follows:
(Insert the information requested below. The residence information must be given for the last FIVE years.)

a. Child's name Jane Doe	Place of birth Los Angeles, CA	Date of birth 10/24/03	Sex F
Period of residence 8/2015 to present	Address 345 Treetop Avenue, Apt 2 Los Angeles, CA 90000 <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) Mary Doe and Gary Doe, 345 Treetop Avenue, Apt 2, Los Angeles, CA 90000 <input type="checkbox"/> Confidential	Relationship Grandmother (on father's side); Grandfather (on father's side)
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
b. Child's name John Doe	Place of birth Los Angeles	Date of birth 06/21/05	Sex M
<input checked="" type="checkbox"/> Residence information is the same as given above for child a. (If NOT the same, provide the information below)			
Period of residence to present	Address <input type="checkbox"/> Confidential	Person child lived with (name and complete current address) <input type="checkbox"/> Confidential	Relationship
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	
to	Child's residence (City, State)	Person child lived with (name and complete current address)	

- c. Additional residence information for a child listed in item a or b is continued on attachment 3c.
- d. Additional children are listed on form FL-105(A)/GC-120(A). (Provide all requested information for additional children.)

SHORT TITLE: Guardianship of Jane Doe and John Doe	CASE NUMBER:
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4. Do you have information about, or have you participated as a party or as a witness or in some other capacity in, another court case or custody or visitation proceeding, in California or elsewhere, concerning a child subject to this proceeding?
 Yes No (If yes, attach a copy of the orders (if you have one) and provide the following information):

Proceeding	Case number	Court <i>(name, state, location)</i>	Court order or judgment <i>(date)</i>	Name of each child	Your connection to the case	Case status
a. <input type="checkbox"/> Family						
b. <input type="checkbox"/> Guardianship						
c. <input type="checkbox"/> Other						

Proceeding	Case Number	Court <i>(name, state, location)</i>
d. <input checked="" type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency	CK65882	Children's Court, California, Monterey Park
e. <input type="checkbox"/> Adoption		

5. One or more domestic violence restraining/protective orders are now in effect. (Attach a copy of the orders if you have one and provide the following information):

Court	County	State	Case number <i>(if known)</i>	Orders expire <i>(date)</i>
a. <input type="checkbox"/> Criminal				
b. <input type="checkbox"/> Family				
c. <input type="checkbox"/> Juvenile Delinquency/ Juvenile Dependency				
d. <input type="checkbox"/> Other				

6. Do you know of any person who is not a party to this proceeding who has physical custody or claims to have custody of or visitation rights with any child in this case? Yes No (If yes, provide the following information):

a. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	b. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child	c. Name and address of person <input type="checkbox"/> Has physical custody <input type="checkbox"/> Claims custody rights <input type="checkbox"/> Claims visitation rights Name of each child
---	---	---

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
 Date: November 22, 2020

Mary Doe	
(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)

7. Number of pages attached: 0

NOTICE TO DECLARANT: You have a continuing duty to inform this court if you obtain any information about a custody proceeding in a California court or any other court concerning a child subject to this proceeding.

- CONFIDENTIAL -
NOTIFICATION TO COURT OF ADDRESS ON CONSERVATORSHIP/GUARDIANSHIP

CASE NUMBER:	DATE OF HEARING:	DATE LETTERS ISSUED:
CHECK ALL BOXES THAT APPLY: <input type="checkbox"/> ACCOUNTING <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE <input type="checkbox"/> TERMINATION <input type="checkbox"/> LIMITED <input type="checkbox"/> SUCCESSOR <input type="checkbox"/> DEMENTIA <input type="checkbox"/> COMPETING		
<input type="checkbox"/> CONSERVATEE <input checked="" type="checkbox"/> WARD	SOCIAL SECURITY NUMBER:	LANGUAGE:
NAME: Jane Doe and John Doe	DATE OF BIRTH: 10/24/03 and 6121/05	PHONE NUMBER: (111) 222-3333
ADDRESS: 345 Treetop Avenue, Apt 2	CITY: Los Angeles	STATE: CA ZIP CODE: 90000
ATTORNEY'S NAME:	BAR NUMBER:	PHONE NUMBER: ()
<input type="checkbox"/> CONSERVATOR <input checked="" type="checkbox"/> GUARDIAN <input type="checkbox"/> RELATIVE <input type="checkbox"/> NON-RELATIVE	SOCIAL SECURITY NUMBER: 123-45-445	LANGUAGE: Spanish
NAME: Mary Doe and Gary Doe	DATE OF BIRTH: 02/05/1951 and 07/07/1949	PHONE NUMBER: (111) 222-3333
ADDRESS: 345 Treetop Avenue, Apt 2	CITY: Los Angeles	STATE: CA ZIP CODE: 90000
E-MAIL:	DRIVER'S LICENSE/I.D. NUMBER: C9876542/ C333333	
ATTORNEY'S NAME:	BAR NUMBER:	PHONE NUMBER: ()

RELATIVES OF PROPOSED CONSERVATEE/WARD:		
NAME & RELATIONSHIP Santiago Doe, Father	ADDRESS: Mexico	PHONE NUMBER: ()
NAME & RELATIONSHIP ADriana Gomez	ADDRESS: Unknown Address	PHONE NUMBER: ()
NAME & RELATIONSHIP	ADDRESS:	PHONE NUMBER: ()
NAME & RELATIONSHIP	ADDRESS:	PHONE NUMBER: ()
NAME & RELATIONSHIP	ADDRESS:	PHONE NUMBER: ()
NAME & RELATIONSHIP	ADDRESS:	PHONE NUMBER: ()
NAME & RELATIONSHIP	ADDRESS:	PHONE NUMBER: ()

<input type="checkbox"/> OTHER COURT CASES PROPOSED CONSERVATEE/CONSERVATOR/GUARDIAN/WARD INVOLVED IN?	
COURT & TYPE OF CASE:	CASE NUMBER:

1. To be submitted at the time the Petition for Appointment of Conservator/Successor Conservator/Guardian is filed.
2. To be submitted at the time Letters of Conservatorship/Guardianship are presented for issuance.
3. To be submitted with the filing of Accountings.
4. Complete additional sheet for other contacts.

CONFIDENTIAL (DO NOT ATTACH TO PETITION)

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>): Mary Doe 345 Treetop Avenue, Apt 2 Los Angeles, CA 90000 TELEPHONE NO.: (111) 222-3333 FAX NO. (<i>Optional</i>): E-MAIL ADDRESS (<i>Optional</i>): ATTORNEY FOR (<i>Name</i>): In Pro Per * (Spanish Speaking Only)	FOR COURT USE ONLY
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SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: same CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Downtown Los Angeles

GUARDIANSHIP OF (<i>Name</i>): Jane Doe and John Doe <div style="text-align: right;">MINOR</div>	CASE NUMBER:
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CONFIDENTIAL GUARDIAN SCREENING FORM Guardianship of <input checked="" type="checkbox"/> Person <input type="checkbox"/> Estate	HEARING DATE AND TIME:	DEPT.:
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The proposed guardian must complete and sign this form. The person requesting appointment of a guardian must submit the completed and signed form to the court with the guardianship petition.

This form must remain confidential.

How This Form Will Be Used

This form is **confidential** and will not be a part of the public file in this case. Each proposed guardian must complete and sign a separate copy of this form under rule 7.1001 of the California Rules of Court. The information provided will be used by the court and by persons and agencies designated by the court to assist the court in determining whether to appoint the proposed guardian as guardian. The proposed guardian **must** respond to each item.

1. a. **Proposed guardian (*name*):** Mary Doe
 b. Date of birth: February 5, 1951
 c. Social security number: d. Driver's license number: C9876542 State: California
 e. Telephone numbers: Home: (111) 222-3333 Work: Other: (111) 222-3333

2. I am I am not required to register as a sex offender under California Penal Code section 290.
 (*If you checked "I am," explain in Attachment 2.*)

3. I have I have not been charged with, arrested for, or convicted of a crime deemed to be a felony or a misdemeanor. (*If you checked "I have," explain in Attachment 3.*)
 (*Check here if you have been arrested for drug or alcohol-related offenses.*)

4. I have I have not had a restraining order or protective order filed against me in the last 10 years.
 (*If you checked "I have," explain in Attachment 4.*)

5. I am I am not receiving services from a psychiatrist, psychologist, or therapist for a mental health-related issue.
 (*If you checked "I am," explain in Attachment 5.*)

6. Do you, or does any other person living in your home, have a social worker or parole or probation officer assigned to him or her?
 Yes No (*If you checked "Yes," explain in Attachment 6 and provide the name and address of each social worker, parole officer, or probation officer.*)

7. Have you, or has any other person living in your home, been charged with, arrested for, or convicted of any form of child abuse, neglect, or molestation? Yes No (*If you checked "Yes," explain in Attachment 7.*)

8. I am I am not aware of any reports alleging any form of child abuse, neglect, or molestation made to any agency charged with protecting children (e.g., Child Protective Services) or any other law enforcement agency regarding me or any other person living in my home. (*If you checked "I am," explain in Attachment 8 and provide the name and address of each agency.*)

9. Have you, or has any other person living in your home, habitually used any illegal substances or abused alcohol?
 Yes No (*If you checked "Yes," explain in Attachment 9.*)

CONFIDENTIAL

GC-212

GUARDIANSHIP OF (Name): Jane Doe and John Doe	CASE NUMBER:
MINOR	

10. Have you, or has any other person living in your home, been charged with, arrested for, or convicted of a crime involving illegal substances or alcohol?
 Yes No (If you checked "Yes," explain in Attachment 10.)
11. Do you or does any other person living in your home suffer from mental illness?
 Yes No (If you checked "Yes," explain in Attachment 11.)
12. Do you suffer from any physical disability that would impair your ability to perform the duties of guardian?
 Yes No (If you checked "Yes," explain in Attachment 12.)
13. I have or may have I do not have an adverse interest that the court may consider to be a risk to, or to have an effect on, my ability to faithfully perform the duties of guardian.
 (If you checked "I have or may have," explain in Attachment 13.)
14. I have I have not previously been appointed guardian, conservator, executor, or fiduciary in another proceeding.
 (If you checked "I have," explain in Attachment 14.)
15. I have I have not been removed as guardian, conservator, executor, or fiduciary in any other proceeding.
 (If you checked "I have," explain in Attachment 15.)
16. I am I am not a private professional fiduciary, as defined in Business and Professions Code section 6501(f).
 (If you checked "I am," respond to item 17. If you checked "I am not," go to item 18.)
17. I am I am not currently licensed by the Professional Fiduciaries Bureau of the Department of Consumer Affairs. My license status and information is stated in item 1 on page 1 of the Professional Fiduciary Attachment signed by me and attached to the petition that proposes my appointment as guardian in this matter. (Complete and sign the Professional Fiduciary Attachment and attach it to the petition, or deliver it to the petitioner for attachment, before the petition is filed. See item 4d of the petition. Use form GC-210(A-PF)/GC-310(A-PF) for this attachment.)
18. I am I am not a responsible corporate officer authorized to act for (name of corporation):
 a California nonprofit charitable corporation that meets the requirements for appointment as guardian of the proposed ward under Probate Code section 2104. I certify that the corporation's articles of incorporation specifically authorize it to accept appointments as guardian. (If you checked "I am," explain the circumstances of the corporation's care of, counseling of, or financial assistance to the proposed ward in Attachment 18.)
19. I have I have not filed for bankruptcy protection within the last 10 years.
 (If you checked "I have," explain in Attachment 19.)

MINORS' CONTACT INFORMATION		
20. Minor's name: Jane Doe Home telephone: (111) 222-3333	School (name): Eagle High School School telephone: 323-111-2222	Other telephone:
21. Minor's name: John Doe Home telephone: (111) 222-3333	School (name): Eagle High School School telephone: 323-111-2222	Other telephone:
22. Minor's name: Home telephone:	School (name): School telephone:	Other telephone:
<input type="checkbox"/> Information on additional minors is attached.		

DECLARATION

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

Date: November 22, 2020

 Mary Doe
 (TYPE OR PRINT NAME OF PROPOSED GUARDIAN)

 (SIGNATURE OF PROPOSED GUARDIAN)*

* Each proposed guardian must fill out and file a separate screening form.

SHORT TITLE: Guardianship of Jane Doe and John Doe	CASE NUMBER:
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ATTACHMENT (Number): 2-15, 19 to GC-212 for First (or only) Proposed Guardian

(This Attachment may be used with any Judicial Council form.)

Attachment 19: Explanation of Mary Doe's filing for bankruptcy protection in the last 10 years: My husband and I filed for bankruptcy in 2012 and our debts were discharged.

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page _____ of _____

(Add pages as required)

CONFIDENTIAL (DO NOT ATTACH TO PETITION)

GC-212

Form with sections for Attorney/Party information, Superior Court of California details, Guardianship of Jane Doe and John Doe, and Confidential Guardian Screening Form options.

The proposed guardian must complete and sign this form. The person requesting appointment of a guardian must submit the completed and signed form to the court with the guardianship petition. This form must remain confidential.

How This Form Will Be Used

This form is confidential and will not be a part of the public file in this case. Each proposed guardian must complete and sign a separate copy of this form under rule 7.1001 of the California Rules of Court.

- 1. a. Proposed guardian (name): Gary Doe
b. Date of birth: July 7, 1949
c. Social security number:
d. Driver's license number: C333333 State: California
e. Telephone numbers: Home: (111) 222-3333 Work: Other: (111) 333-4444
2. I am not required to register as a sex offender...
3. I have not been charged with, arrested for, or convicted of a crime...
4. I have not had a restraining order or protective order...
5. I am not receiving services from a psychiatrist, psychologist, or therapist...
6. Do you, or does any other person living in your home, have a social worker or parole or probation officer assigned to him or her?
7. Have you, or has any other person living in your home, been charged with, arrested for, or convicted of any form of child abuse, neglect, or molestation?
8. I am not aware of any reports alleging any form of child abuse, neglect, or molestation...
9. Have you, or has any other person living in your home, habitually used any illegal substances or abused alcohol?

CONFIDENTIAL

GC-212

GUARDIANSHIP OF (Name): Jane Doe and John Doe	CASE NUMBER:
MINOR	

10. Have you, or has any other person living in your home, been charged with, arrested for, or convicted of a crime involving illegal substances or alcohol?
 Yes No (If you checked "Yes," explain in Attachment 10.)
11. Do you or does any other person living in your home suffer from mental illness?
 Yes No (If you checked "Yes," explain in Attachment 11.)
12. Do you suffer from any physical disability that would impair your ability to perform the duties of guardian?
 Yes No (If you checked "Yes," explain in Attachment 12.)
13. I have or may have I do not have an adverse interest that the court may consider to be a risk to, or to have an effect on, my ability to faithfully perform the duties of guardian.
 (If you checked "I have or may have," explain in Attachment 13.)
14. I have I have not previously been appointed guardian, conservator, executor, or fiduciary in another proceeding.
 (If you checked "I have," explain in Attachment 14.)
15. I have I have not been removed as guardian, conservator, executor, or fiduciary in any other proceeding.
 (If you checked "I have," explain in Attachment 15.)
16. I am I am not a private professional fiduciary, as defined in Business and Professions Code section 6501(f).
 (If you checked "I am," respond to item 17. If you checked "I am not," go to item 18.)
17. I am I am not currently licensed by the Professional Fiduciaries Bureau of the Department of Consumer Affairs. My license status and information is stated in item 1 on page 1 of the Professional Fiduciary Attachment signed by me and attached to the petition that proposes my appointment as guardian in this matter. (Complete and sign the Professional Fiduciary Attachment and attach it to the petition, or deliver it to the petitioner for attachment, before the petition is filed. See item 4d of the petition. Use form GC-210(A-PF)/GC-310(A-PF) for this attachment.)
18. I am I am not a responsible corporate officer authorized to act for (name of corporation):

a California nonprofit charitable corporation that meets the requirements for appointment as guardian of the proposed ward under Probate Code section 2104. I certify that the corporation's articles of incorporation specifically authorize it to accept appointments as guardian. (If you checked "I am," explain the circumstances of the corporation's care of, counseling of, or financial assistance to the proposed ward in Attachment 18.)

19. I have I have not filed for bankruptcy protection within the last 10 years.
 (If you checked "I have," explain in Attachment 19.)

MINORS' CONTACT INFORMATION		
20. Minor's name: Jane Doe	School (name): Eagle High School	
Home telephone: (111) 222-3333	School telephone: 323-111-2222	Other telephone:
21. Minor's name: John Doe	School (name): Eagle High School	
Home telephone: (111) 222-3333	School telephone: 323-111-2222	Other telephone:
22. Minor's name:	School (name):	
Home telephone:	School telephone:	Other telephone:
<input type="checkbox"/> Information on additional minors is attached.		

DECLARATION

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

Date: November 22, 2020

Gary Doe

(TYPE OR PRINT NAME OF PROPOSED GUARDIAN)



(SIGNATURE OF PROPOSED GUARDIAN)*

* Each proposed guardian must fill out and file a separate screening form.

SHORT TITLE: Guardianship of Jane Doe and John Doe	CASE NUMBER:
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ATTACHMENT (Number): 2-15, 19 to GC-212 for Second Proposed Guardian

(This Attachment may be used with any Judicial Council form.)

Attachment 19: Explanation of Gary Doe's filing for bankruptcy protection in the last 10 years: My wife and I filed for bankruptcy and our debt were discharged.

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page _____ of _____

(Add pages as required)

TITLE OF CASE Guardianship of Jane Doe and John Doe	CASE NUMBER
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**PROBATE CASE COVERSHEET AND CERTIFICATE OF
GROUNDS FOR ASSIGNMENT TO DISTRICT**

This form is required for all new probate cases filed in the Los Angeles Superior Court.

Step 1: In the "Type of Action" column below, select one type of action that best describes the nature of this case by checking a box.

Step 2: Across from the "Type of Action" you selected, place an "X" in the column that corresponds to the reason for your choice of district. Note that you may only select from the boxes that are not shaded.

TYPE OF ACTION (check one) ▼	District where one or more parties resides	District where proposed conservatee, person w/o capacity or minor resides nor or proposed conservatee resides	District where petitioner resides	District where decedent resided	Decedent, conservatee or minor not CA resident but property is in district	Principal place of trust administration (Probate Code § 17002)	Other statutory authority (list statute): Or may be filed in Central Dist. per LASC Rule 2.3(b)
Decedent's Estate							
<input type="checkbox"/> Petition – Letters of Administration (Initial) [3069]							
<input type="checkbox"/> Petition – Letters of Special Admin w/Gen Powers (Initial) [3070]							
<input type="checkbox"/> Petition – Letters of Special Admin w/o Gen Powers (Initial) [3071]							
<input type="checkbox"/> Petition – Probate of Lost Will (Initial) [3074]							
<input type="checkbox"/> Petition – Probate of Will (Initial) [3075]							
Conservatorship							
<input type="checkbox"/> Petition – Appoint Conservator of Estate – Attend/Nominate (Initial) [3303] <i>(Note: The proposed conservatee will appear at the hearing and has nominated the proposed conservator.)</i>							
<input type="checkbox"/> Petition – Appoint Conservator of Estate Only (Initial) [3046]							
<input type="checkbox"/> Petition – Appoint Conservator of Person Only (Initial) [3047]							
<input type="checkbox"/> Petition – Appoint Conservator of Person & Estate (Initial) [3048]							
<input type="checkbox"/> Petition – Appoint Ltd Conservator of Person/Person & Estate (Initial) [3198]							
Guardianship							
<input type="checkbox"/> Petition – Appoint Guardian of Estate Only (Initial) [3049]							
<input checked="" type="checkbox"/> Petition – Appoint Guardian of Person Only (Initial) [3051]		✓					
<input type="checkbox"/> Petition – Appoint Guardian of Person & Estate (Initial) [3050]							
Trust							
<input type="checkbox"/> Accounting – Trust (Initial) [3229]							
<input type="checkbox"/> Notice – Initial Trust Filing & Notice to Creditors [3038]							
<input type="checkbox"/> Petition – Special Needs Trust (Initial) [3297]							
<input type="checkbox"/> Petition – Trust/Pursuant Prob Code Sec 17200 (Initial) [3076]							
Minor's Compromise							
<input type="checkbox"/> Petition – Approve Minor's Compromise (Initial) [3058]							
<input type="checkbox"/> Petition – Approve Minor's Compromise (Expedited) [3154]							

<p style="text-align: center;">TYPE OF ACTION (check one) ▼</p>	District where one or more parties resides	District where proposed conservatee, person w/o capacity or minor resides nor or proposed conservatee resides	District where petitioner resides	District where decedent resided	Decedent, conservatee or minor not CA resident but property is in district	Principal place of trust administration (Probate Code § 17002)	Other statutory authority (list statute): Or may be filed in Central Dist. per LASC Rule 2.3(b)
Other Probate Matters							
Other Probate With At Least One Hearing							
<input type="checkbox"/> Petition – Advance Health Care Directive (Initial) [3044]							
<input type="checkbox"/> Petition – Appoint Successor Custodian/CUTMA (Initial) [3052]							
<input type="checkbox"/> Petition – Authority to Give Medical Consent w/o Conservatorship (Initial) [3059]							
<input type="checkbox"/> Petition – Determine Succession to Real Property (Initial) [3301]							
<input type="checkbox"/> Petition – Establish Fact of: <input type="checkbox"/> Birth [3065], <input type="checkbox"/> Death [3066], or <input type="checkbox"/> Marriage [3067]							
<input type="checkbox"/> Petition – Release of Decedent's Remains (Initial) [3077]							
<input type="checkbox"/> Petition – Spousal/Domestic Partner Property (Initial) [3179]							
<input type="checkbox"/> Petition – Transaction Where Spouse Lacks Capacity (Initial) [3082]							
<input type="checkbox"/> Petition – Tuberculosis Matter [3083]							
<input type="checkbox"/> Other Probate matter (specify): _____							
Other Probate With No Hearing							
<input type="checkbox"/> Affidavit – Real Property of Small Value - Prob Code Sec 13200 [3001]							
<input type="checkbox"/> Petition – Order Setting Aside Estate of Small Value (Prob Code Sec 6602) [3292]							
<input type="checkbox"/> Petition – Summary Probate (Public Administrator) [3081]							

Step 3: Select the appropriate district:

Central North (Antelope Valley)

The undersigned hereby certifies that the above entitled matter is properly filed for assignment to the Central District of the Los Angeles Superior Court pursuant to the California Probate Code and Rule 2.3 of this court for the reason checked above. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration was executed on 07/25/2024.
(Date)

(Signature of Attorney or Self-Represented Party)

Step 4: Indicate if person filing this petition will require an interpreter:

Yes No

If yes, what language? Spanish

Step 5: The following information is required for the proposed conservatee, ward, trustor or decedent.

Please check the appropriate box for the subject of this case:

- Conservatee Trustor Other: _____
 Ward (minor in a guardianship case) Decedent

Does the subject of this Petition require an interpreter?

- Yes No

If yes, what language? Spanish

First Name	Last Name	Middle Name	Suffix
A.K.A(s) Jane Doe and John Doe			
Email Address:			
Cell Phone (For Text Messaging):			
I accept service and notices to be delivered to me by <input type="checkbox"/> Email <input type="checkbox"/> Cell Phone			
Home Address:			
Street 345 Treetop Avenue, Apt 2			Apt./Suite/Unit #
City Los Angeles		State CA	Zip Code 90000
Mailing Address: <input checked="" type="checkbox"/> same as above			
Street			Apt./Suite/Unit #
City		State	Zip Code
IDENTIFICATION (For Minors)			
Gender:		Date of Birth: (mm/dd/yyyy)	
<input type="checkbox"/> Male	<input type="checkbox"/> Female	_____ / _____ / _____	
Child 1 Gender F		Child 1: 10/24/03	
Child 2 Gender M		Child 2: 06/21/05	

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NO.: NAME: Mary Doe FIRM NAME: STREET ADDRESS: 345 Treetop Avenue, Apt 2 CITY: Los Angeles STATE: CA ZIP CODE: 90000 TELEPHONE NO.: (111) 222-3333 FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): See 1 in Addendum	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: same CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Downtown Los Angeles	
GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name): Jane Doe and John Doe	
ORDER APPOINTING GUARDIAN OR EXTENDING GUARDIANSHIP OF THE PERSON	CASE NUMBER:
WARNING: THIS APPOINTMENT IS NOT EFFECTIVE UNTIL LETTERS HAVE ISSUED.	

1. The petition for appointment of a guardian or extension of a guardianship of the person came on for hearing as follows (check boxes c, d, and e to indicate personal presence):

- a. Judge (name):
- b. Hearing date: Time: Dept.: Room:
- c. Petitioner (name): **Mary Doe**
- d. Attorney for Petitioner (name): **In Pro Per**
- e. Attorney for (proposed) ward (name, address, e-mail, and telephone):

THE COURT FINDS

- 2. a. All notices required by law have been given.
- b. Notice of hearing to the following persons has been should be dispensed with (names):
- 3. Appointment of a guardian of the person estate of the proposed ward is necessary or convenient. (NOTE: The Probate Code does not authorize the appointment of a guardian of the estate for a proposed ward 18 years of age or older.)
- 4. Extension of the guardianship of the person past the ward's 18th birthday is necessary or convenient.
- 5. Granting the guardian powers to be exercised independently under Probate Code section 2590 is to the advantage and benefit and is in the best interest of the guardianship estate.
- 6. Attorney (name): has been appointed by the court as legal counsel to represent the (proposed) ward in these proceedings. The cost for representation is: \$
- 7. The appointed court investigator, probation officer, or domestic relations investigator is (name, title, address, and telephone):

Do NOT use this form for a temporary guardianship.

GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (name): Jane Doe and John Doe	CASE NUMBER:
--	--------------

THE COURT ORDERS

8. a. (name): Mary Doe Gary Doe
 (address): 345 Treetop Avenue, Apt 2 345 Treetop Avenue, Apt 2 (telephone): (111) 222-3333
 Los Angeles, CA 90000 Los Angeles, CA 90000

is appointed guardian of the PERSON of (name): Jane Doe and John Doe and Letters shall issue upon qualification.

b. (Not applicable to a proposed ward 18 years of age or older.)

(name):
 (address): (telephone):

is appointed guardian of the ESTATE of (name): and Letters shall issue upon qualification.

c. The appointment of

(name):
 (address): (telephone):

as guardian of the PERSON of (name): is extended past the ward's 18th birthday and new Letters shall issue forthwith.

9. Notice of hearing to the persons named in item 2b is dispensed with.

10. a. Bond is not required. PERSON ONLY

b. Bond is fixed at: \$ to be furnished by an authorized surety company or as otherwise provided by law.
 c. Deposits of: \$ are ordered to be placed in a blocked account at (specify institution and location):

and receipts shall be filed. No withdrawals shall be made without a court order.

Additional orders in Attachment 10c.

d. The guardian is not authorized to take possession of money or any other property without a specific court order.

11. For legal services rendered on behalf of the (proposed) ward, the parents of the (proposed) ward

the (proposed) ward's estate shall pay to (name):
 the sum of: \$
 forthwith as follows (specify terms, including any combination of payers):

12. The guardian of the estate is granted authorization under Probate Code section 2590 to exercise independently the powers specified in Attachment 12 subject to the conditions provided.

13. Orders are granted relating to the powers and duties of the guardian of the person under Probate Code sections 2351–2358 as specified in Attachment 13.

GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF <i>(name):</i> Jane Doe and John Doe	CASE NUMBER:
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14. Orders are granted relating to the conditions imposed under Probate Code section 2402 upon the guardian of the estate as specified in Attachment 14.

15. Other orders as specified in Attachment 15 are granted.

16. The probate referee appointed is *(name and address)*:

17. Number of boxes checked in items 9–16: _____

18. Number of pages attached: _____

Date:

JUDGE OF THE SUPERIOR COURT

SIGNATURE FOLLOWS LAST ATTACHMENT

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NO.: NAME: Mary Doe FIRM NAME: STREET ADDRESS: 345 Treetop Avenue, Apt 2 CITY: Los Angeles STATE: CA ZIP CODE: 90000 TELEPHONE NO.: (111) 222-3333 FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name): In Pro Per * (Spanish Speaking Only)	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: same CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Downtown Los Angeles	
GUARDIANSHIP OF (name): Jane Doe and John Doe	
LETTERS OF GUARDIANSHIP <input checked="" type="checkbox"/> Person <input type="checkbox"/> Estate	CASE NUMBER:

LETTERS

1. (Name): **Mary Doe and Gary Doe** is appointed guardian of the person estate
of (name): **Jane Doe and John Doe**

2. The appointment of (name): _____ as guardian of the person of
(name): _____
is extended past the ward's 18th birthday as of (date): _____

3. Other powers have been granted and conditions have been imposed as follows:
 - a. Powers to be exercised independently under Probate Code section 2590 are specified in attachment 3a (specify powers, restrictions, conditions, and limitations).
 - b. Conditions relating to the care and custody of the property under Probate Code section 2402 are specified in attachment 3b.
 - c. Conditions relating to the care, treatment, education, and welfare of the ward under Probate Code section 2358 are specified in attachment 3c.
 - d. Other powers granted or conditions imposed are specified on attachment 3d specified below.

4. The guardian is not authorized to take possession of money or any other property without a specific court order.
5. The guardianship of the person terminates by operation of law on (date): _____
6. Number of pages attached: 0

WITNESS, clerk of the court, with seal of the court affixed.

(SEAL)

Date: _____

Clerk, by _____, Deputy

GUARDIANSHIP OF (name): Jane Doe and John Doe	CASE NUMBER:
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NOTICE TO INSTITUTIONS AND FINANCIAL INSTITUTIONS
(Probate Code sections 2890–2893)

When these *Letters of Guardianship* (Letters) are delivered to you as an employee or other representative of an *institution* or *financial institution* (described below) in order for the guardian of the estate (1) to take possession or control of an asset of the minor named above held by your institution (including changing title, withdrawing all or any portion of the asset, or transferring all or any portion of the asset) or (2) to open or change the name of an account or a safe-deposit box in your financial institution to reflect the guardianship, you must fill out Judicial Council form GC-050 (for an institution) or form GC-051 (for a financial institution). An officer authorized by your institution or financial institution must date and sign the form, and you must file the completed form with the court.

There is no filing fee for filing the form. You may either arrange for personal delivery of the form or mail it to the court for filing at the address given for the court on page 1 of these Letters.

The guardian should deliver a blank copy of the appropriate form to you with these Letters, but it is your institution's or financial institution's responsibility to complete the correct form, have an authorized officer sign it, and file the completed form with the court. If the correct form is not delivered with these Letters or is unavailable for any other reason, blank copies of the forms may be obtained from the court. The forms may also be accessed from the judicial branch's public website free of charge. The Internet address (URL) is www.courts.ca.gov/forms.htm. Select the form group *Probate—Guardianships and Conservatorships* and scroll down to form GC-050 for an institution or form GC-051 for a financial institution. The forms may be printed out as blank forms and filled in by typewriter (nonfillable form) or may be filled out online and printed out ready for signature and filing (fillable form).

An *institution* under California Probate Code section 2890(c) is an insurance company, insurance broker, insurance agent, investment company, investment bank, securities broker-dealer, investment advisor, financial planner, financial advisor, or any other person who takes, holds, or controls an asset subject to a conservatorship or guardianship other than a financial institution. Institutions must file a *Notice of Taking Possession or Control of an Asset of Minor or Conservatee* (form GC-050) for an asset of the minor or conservatee held by the institution. A single form may be filed for all affected assets held by the institution.

A *financial institution* under California Probate Code section 2892(b) is a bank, trust (including a Totten trust account but excluding other trust arrangements described in Probate Code section 82(b)), savings and loan association, savings bank, industrial bank, or credit union. Financial institutions must file a *Notice of Opening or Changing a Guardianship or Conservatorship Account or Safe-Deposit Box* (form GC-051) for an account or a safe-deposit box held by the financial institution. A single form may be filed for all affected accounts or safe-deposit boxes held by the financial institution.

LETTERS OF GUARDIANSHIP

AFFIRMATION

I solemnly affirm that I will perform according to law the duties of guardian.

Executed on (date): November 22, 2020 , at (place): Los Angeles, CA

Mary Doe
 Gary Doe

(TYPE OR PRINT NAME)

Mary Doe
Gary Doe

(SIGNATURE OF APPOINTEE)

CERTIFICATION

I certify that this document, including any attachments, is a correct copy of the original on file in my office, and that the Letters issued to the person appointed above have not been revoked, annulled, or set aside, and are still in full force and effect.

(SEAL)

Date:

Clerk, by _____, Deputy

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): Mary Doe 345 Treetop Avenue, Apt 2, Los Angeles, CA 90000 TELEPHONE NO.: (111) 222-3333 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): In Pro Per * (Spanish Speaking Only)	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: same CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Downtown Los Angeles	
GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE Jane Doe and John Doe OF (Name): MINOR	
DUTIES OF GUARDIAN and Acknowledgment of Receipt	CASE NUMBER:

DUTIES OF GUARDIAN

When you are appointed by the court as a guardian of a minor, you become an officer of the court and assume certain duties and obligations. An attorney is best qualified to advise you about these matters. You should clearly understand the information on this form. You will find additional information in the *Guardianship Pamphlet (for Guardianships of Children in the Probate Court)* (Form GC-205), which is available from the court.

1. GUARDIANSHIP OF THE PERSON

If the probate court appoints you as a *guardian of the person* for a child, you will be required to assume important duties and obligations.

- a. **Fundamental responsibilities** - The guardian of the person of a child has the care, custody, and control of the child. As guardian, you are responsible for providing for food, clothing, shelter, education, and all the medical and dental needs of the child. You must provide for the safety, protection, and physical and emotional growth of the child.
- b. **Custody** - As guardian of the person of the child, you have full legal and physical custody of the child and are responsible for **all** decisions relating to the child. The child's parents can no longer make decisions for the child while there is a guardianship. The parents' rights are suspended—not terminated—as long as a guardian is appointed for a minor.
- c. **Education** - As guardian of the person of the child, you are responsible for the child's education. You determine where the child should attend school. As the child's advocate within the school system, you should attend conferences and play an active role in the child's education. For younger children, you may want to consider enrolling the child in Head Start or other similar programs. For older children, you should consider their future educational needs such as college or a specialized school. You must assist the child in obtaining services if the child has special educational needs. You should help the child in setting and attaining his or her educational goals.
- d. **Residence** - As guardian, you have the right to determine where the child lives. The child will normally live with you, but when it is necessary, you are allowed to make other arrangements if it is in the best interest of the child. You should obtain court approval before placing the child back with his or her parents.

As guardian, you **do not** have the right to change the child's residence to a place outside of California unless you first receive the court's permission. If the court grants permission, California law requires that you establish legal guardianship in the state where the child will be living. Individual states have different rules regarding guardianships. You should seek additional information about guardianships in the state where you want the child to live.

(Continued on reverse)

GUARDIAN OF (Name): Jane Doe and John Doe	CASE NUMBER:
MINOR	

- e. Medical treatment** - As guardian, you are responsible for meeting the medical needs of the child. In most cases, you have the authority to consent to the child's medical treatment. However, if the child is 14 years or older, surgery may not be performed on the child unless either (1) both the child and the guardian consent or (2) a court order is obtained that specifically authorizes the surgery. This holds true except in emergencies. A guardian may not place a child involuntarily in a mental health treatment facility under a probate guardianship. A mental health conservatorship proceeding is required for such an involuntary commitment. However, the guardian may secure counseling and other necessary mental health services for the child. The law also allows older and more mature children to consent to their own treatment in certain situations such as outpatient mental health treatment, medical care related to pregnancy or sexually transmitted diseases, and drug and alcohol treatment.
- f. Community resources** - There are agencies in each county that may be helpful in meeting the specific needs of children who come from conflicted, troubled, or deprived environments. If the child has special needs, you must strive to meet those needs or secure appropriate services.
- g. Financial support** - Even when the child has a guardian, the parents are still obligated to financially support the child. The guardian may take action to obtain child support. The child may also be eligible for Temporary Aid for Needy Families, TANF (formerly known as AFDC), social security benefits, Veterans Administration benefits, Indian child welfare benefits, and other public or private funds.
- h. Visitation** - The court may require that you allow visitation or contact between the child and his or her parents. The child's needs often require that the parent-child relationship be maintained, within reason. However, the court may place restrictions on the visits, such as the requirement of supervision. The court may also impose other conditions in the child's best interest.
- i. Driver's license** - As guardian of the person, you have the authority to consent to the minor's application for a driver's license. If you consent, you will become liable for any civil damages that may result if the minor causes an accident. The law requires that anyone signing the DMV application obtain insurance to cover the minor.
- j. Enlistment in the armed services** - The guardian may consent to a minor's enlistment in the armed services. If the minor enters into active duty with the armed forces, the minor becomes emancipated under California law.
- k. Marriage** - For the minor to marry, the guardian **and the court** must give permission. If the minor enters a valid marriage, the minor becomes emancipated under California law.
- l. Change of address** - A guardian must notify the court in writing of any change in the address of either the child or the guardian. This includes any changes that result from the child's leaving the guardian's home or returning to the parent's home. You **must** always obtain **court permission** before you move the child to another state or country.
- m. Court visitors and status reports** - Some counties have a program in which "court visitors" track and review guardianships. If your county has such a program, you will be expected to cooperate with all requests of the court visitor. As guardian, you may also be required to fill out and file status reports. In all counties, you must cooperate with the court and court investigators.
- n. Misconduct of the child** - A guardian, like a parent, is liable for the harm and damages caused by the willful misconduct of a child. There are special rules concerning harm caused by the use of a firearm. If you are concerned about your possible liability, you should consult an attorney.
- o. Additional responsibilities** - The court may place other conditions on the guardianship or additional duties upon you, as guardian. For example, the court may require the guardian to complete counseling or parenting classes, to obtain specific services for the child, or to follow a scheduled visitation plan between the child and the child's parents or relatives. As guardian, you must follow all court orders.

(Continued on page three)

GUARDIAN OF (Name): Jane Doe and John Doe	CASE NUMBER:
MINOR	

- p. Termination of guardianship of the person** - A guardianship of the person automatically ends when the child reaches the age of 18, is adopted, marries, is emancipated by court order, enters into active military duty, or dies. If none of these events has occurred, the child, a parent, or the guardian may petition the court for termination of guardianship. But it must be shown that the guardianship is no longer necessary or that termination of the guardianship is in the child's best interest.

2. GUARDIANSHIP OF THE ESTATE

If the court appoints you as *guardian of the child's estate*, you will have additional duties and obligations. The money and other assets of the child are called the child's "estate." Appointment as guardian of a child's estate is taken very seriously by the court. The guardian of the estate is required to manage the child's funds, collect and make an inventory of the assets, keep accurate financial records, and regularly file financial accountings with the court.

MANAGING THE ESTATE

- a. Prudent investments** - As guardian of the estate, you must manage the child's assets with the care of a prudent person dealing with someone else's property. This means that you must be cautious and may not make speculative or risky investments.
- b. Keeping estate assets separate** - As guardian of the estate, you must keep the money and property of the child's estate separate from everyone else's, including your own. When you open a bank account for the estate, the account name must indicate that it is a *guardianship* account and not your personal account. You should use the child's social security number when opening estate accounts. You should never deposit estate funds in your personal account or otherwise mix them with your own funds or anyone else's funds, even for brief periods. Securities in the estate must be held in a name that shows that they are estate property and not your personal property.
- c. Interest-bearing accounts and other investments** - Except for checking accounts intended for ordinary expenses, you should place estate funds in interest-bearing accounts. You may deposit estate funds in insured accounts in federally insured financial institutions, but you should not put more than \$100,000 in any single institution. You should consult with an attorney before making other kinds of investments.
- d. Blocked accounts** - A *blocked account* is an account with a financial institution in which money is placed. No person may withdraw funds from a blocked account without the court's permission. Depending on the amount and character of the child's property, the guardian may elect **or the court may require** that estate assets be placed in a blocked account. As guardian of the estate, you must follow the directions of the court and the procedures required to deposit funds in this type of account. The use of a blocked account is a safeguard and may save the estate the cost of a bond.
- e. Other restrictions** - As guardian of the estate, you will have many other restrictions on your authority to deal with estate assets. Without prior court order, you **may not** pay fees to yourself or your attorney. You may not make a gift of estate assets to anyone. You may not borrow money from the estate. As guardian, you may not use estate funds to purchase real property without a prior court order. If you do not obtain the court's permission to spend estate funds, you may be compelled to reimburse the estate from your own personal funds and may be removed as guardian. You should consult with an attorney concerning the legal requirements relating to sales, leases, mortgages, and investment of estate property. If the child of whose estate you are the guardian has a living parent or if that child receives assets or is entitled to support from another source, you must obtain court approval before using guardianship assets for the child's support, maintenance, or education. You must file a petition or include a request for approval in the original petition, and set forth which exceptional circumstances justify any use of guardianship assets for the child's support. The court will ordinarily grant such a petition for only a limited period of time, usually not to exceed one year, and only for specific and limited purposes.

INVENTORY OF ESTATE PROPERTY

- f. Locate the estate's property** - As guardian of the estate, you must locate, take possession of, and protect the child's income and assets that will be administered in the estate. You must change the ownership of all assets into the guardianship estate's name. For real estate, you should record a copy of your *Letters of Guardianship* with the county recorder in each county where the child owns real property.

(Continued on reverse)

GUARDIAN OF (Name): Jane Doe and John Doe	CASE NUMBER:
MINOR	

- g. Determine the value of the property** - As guardian of the estate, you must arrange to have a court-appointed referee determine the value of the estate property unless the appointment is waived by the court. You—not the referee—must determine the value of certain "cash items." An attorney can advise you about how to do this.
- h. File an inventory and appraisal** - As guardian of the estate, you must file an inventory and appraisal within 90 days after your appointment. You may be required to return to court 90 days after your appointment as guardian of the estate to ensure that you have properly filed the inventory and appraisal.

INSURANCE

- i. Insurance coverage** - As guardian of the estate, you should make sure that there is appropriate and sufficient insurance covering the assets and risks of the estate. You should maintain the insurance in force throughout the entire period of the guardianship or until the insured asset is sold.

RECORD KEEPING AND ACCOUNTING

- j. Records** - As guardian of the estate, you must keep complete, accurate records of each financial transaction affecting the estate. The checkbook for the guardianship checking account is essential for keeping records of income and expenditures. You should also keep receipts for all purchases. Record keeping is critical because you will have to prepare an accounting of all money and property that you have received, what you have spent, the date of each transaction, and its purpose. You will also have to be able to describe in detail what is left after you have paid the estate's expenses.
- k. Accountings** - As guardian of the estate, you must file a petition requesting that the court review and approve your accounting one year after your appointment and at least every two years after that. The court may ask that you justify some or all expenditures. You should have receipts and other documents available for the court's review, if requested. If you do not file your accounting as required, the court will order you to do so. You may be removed as guardian for failure to file an accounting.
- l. Format** - As guardian of the estate, you must comply with all state and local rules when filing your accounting. A particular format is specified in the Probate Code, which you must follow when you present your account to the court. You should check local rules for any special local requirements.
- m. Legal advice** - An attorney can advise you and help you prepare your inventories, accountings, and petitions to the court. If you have questions, you should consult with an attorney.

3. OTHER GENERAL INFORMATION

- a. Removal of a guardian** - A guardian may be removed for specific reasons or when it is in the child's best interest. A guardian may be removed either on the court's own motion or by a petition filed by the child, a relative of the child, or any other interested person. If necessary, the court may appoint a successor guardian, or the court may return the child to a parent if that is found to be in the child's best interest.
- b. Legal documents** - For your appointment as guardian to be valid, the *Order Appointing Guardian of Minor* must be signed. Once the court signs the order, the guardian **must** go to the clerk's office, where *Letters of Guardianship* will be issued. *Letters of Guardianship* is a legal document that provides proof that you have been appointed and are serving as the guardian of a minor. You should obtain several certified copies of the *Letters* from the clerk. These legal documents will be of assistance to you in the performance of your duties, such as enrolling the child in school, obtaining medical care, and taking care of estate business.
- c. Attorneys and legal resources** - If you have an attorney, the attorney will advise you on your duties and responsibilities, the limits of your authority, the rights of the child, and your dealings with the court. **If you have legal questions, you should consult with your attorney.** Please remember that the court staff cannot give you legal advice.

(Continued on page five)

GUARDIAN OF (Name): Jane Doe and John Doe	CASE NUMBER:
MINOR	

If you are not represented by an attorney, you may obtain answers to your questions by contacting community resources, private publications, or your local law library.

NOTICE: This statement of duties is a summary and is not a complete statement of the law. Your conduct as a probate guardian is governed by the law itself and not by this summary.

ACKNOWLEDGMENT OF RECEIPT

1. I have petitioned the court to be appointed as a guardian.
2. I acknowledge that I have received a copy of this statement of the duties of the position of guardian.

Date: November 22, 2020

 Mary Doe
 (TYPE OR PRINT NAME)

▶ _____
Mary Doe
 (SIGNATURE OF PETITIONER)

Date:

 Gary Doe
 (TYPE OR PRINT NAME)

▶ _____
Gary Doe
 (SIGNATURE OF PETITIONER)

Date:

 (TYPE OR PRINT NAME)

▶ _____
 (SIGNATURE OF PETITIONER)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Mary Doe 345 Treetop Avenue, Apt 2 Los Angeles, CA 90000 TELEPHONE NO.: (111) 222-3333 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): In Pro Per * (Spanish Speaking Only)	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: same CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Downtown Los Angeles	
<input checked="" type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name): Jane Doe and John Doe <div style="text-align: right;"><input checked="" type="checkbox"/> MINOR <input type="checkbox"/> (PROPOSED) CONSERVATEE</div>	
NOTICE OF HEARING—GUARDIANSHIP OR CONSERVATORSHIP	CASE NUMBER:

**This notice is required by law.
This notice does not require you to appear in court, but you may attend the hearing if you wish.**

1. NOTICE is given that (name): *Mary Doe*
(representative capacity, if any):
has filed (specify): **NOTICE OF HEARING AND PETITION FOR APPOINTMENT OF
GUARDIAN OF MINOR**
2. You may refer to documents on file in this proceeding for more information. (Some documents filed with the court are confidential. Under some circumstances you or your attorney may be able to see or receive copies of confidential documents if you file papers in the proceeding or apply to the court.)
3. The petition includes an application for the independent exercise of powers by a guardian or conservator under Probate Code section 2108 Probate Code section 2590.
Powers requested are specified below specified in Attachment 3.
4. A HEARING on the matter will be held as follows:

a. Date:	Time:	<input checked="" type="checkbox"/> Dept.:	<input checked="" type="checkbox"/> Room:
b. Address of court <input checked="" type="checkbox"/> same as noted above <input type="checkbox"/> is (specify):			

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available upon request if at least 5 days notice is provided. Contact the clerk's office for *Request for Accommodations by Persons with Disabilities and Order* (form MC-410). (Civil Code section 54.8.)



GUARDIANSHIP CONSERVATORSHIP OF THE PERSON ESTATE CASE NUMBER:
OF (Name): Jane Doe and John Doe
 MINOR (PROPOSED) CONSERVATEE

NOTE: *

A copy of this *Notice of Hearing—Guardianship or Conservatorship* ("Notice") must be "served" on—delivered to—each person who has the right under the law to be notified of the date, time, place, and purpose of a court hearing in a guardianship or conservatorship. Copies of this Notice may be served by mail in most situations. In a guardianship, however, copies of this Notice must sometimes be personally served on certain persons; and copies of this Notice may be personally served instead of served by mail in both guardianships and conservatorships. The petitioner (the person who requested the court hearing) **may not personally perform either service by mail or personal service**, but must show the court that copies of this Notice have been served in a way the law allows. The petitioner does this by arranging for someone else to perform the service and complete and sign a proof of service, which the petitioner then files with the original Notice.

This page contains a proof of service that may be used only to show service by mail. To show personal service, each person who performs the service must complete and sign a proof of personal service, and each signed copy of that proof of service must be attached to this Notice when it is filed with the court.. You may use form GC-020(P) to show personal service of this Notice.

* (This Note replaces the clerk's certificate of posting on prior versions of this form. If notice by posting is desired, attach a copy of form GC-020(C), Clerk's Certificate of Posting Notice of Hearing—Guardianship or Conservatorship. (See Prob. Code, § 2543(c).)

PROOF OF SERVICE BY MAIL

1. I am over the age of 18 and not a party to this cause. I am a resident of or employed in the county where the mailing occurred.
2. My residence or business address is (*specify*):
3. I served the foregoing *Notice of Hearing—Guardianship or Conservatorship* on each person named below by enclosing a copy in an envelope addressed as shown below AND
 - a. **depositing** the sealed envelope with the United States Postal Service on the date and at the place shown in item 4 with the postage fully prepaid.
 - b. **placing** the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.
4. a. Date mailed: _____ b. Place mailed (*city, state*): _____
5. I served with the *Notice of Hearing—Guardianship or Conservatorship* a copy of the petition or other document referred to in the Notice.

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 OF PERSON COMPLETING THIS FORM)
(SIGNATURE OF PERSON COMPLETING THIS FORM)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

Name of person served

Address (*number, street, city, state, and zip code*)

1. Dep't of Children & Family Services	ATTN: Guardianship Section, 201 Centre Plaza Drive, Monterey Park, CA 91754
2. Javier Doe (sibling)	
3.	
4.	

Continued on an attachment. (*You may use form DE-120(MA)/GC-020(MA) to show additional persons served.*)

1 Name: Mary Doe
2 Address: 345 Treetop Avenue, Apt 2
3 Los Angeles, CA 90000

4 Phone: (111) 222-3333

5 In pro per

6
7 SUPERIOR COURT OF THE STATE OF CALIFORNIA
8 COUNTY OF LOS ANGELES

9
10) Case No.
11)
12)
13 In Re Guardianship of the Person) DECLARATION OF DUE DILIGENCE
14)
15 of)
16 Jane Doe and John Doe) Date:
17) Time: 10:30 a.m.
18) Dep't:
19)
20)
21)
22)
23)
24)
25)
26)
27)
28)
Minor(s)

17 _____
18 I, _____, declare that, on _____, I searched for the
19 whereabouts of:

- 20 _____ Father, Name: _____
21 Mother, Name: Adriana Gomez
22 _____
23 _____ Brother/Sister, Name(s) _____
24 _____
25 Maternal Grandmother, Name: Stella Gomez
26 Maternal Grandfather, Name: Edgar Gomez
27 _____ Paternal Grandmother, Name: _____
28 _____ Paternal Grandfather, Name: _____

1 By doing the following:

2 _____ Searching directory assistance information _____ visiting last known address:

3 (List address): _____

4 _____ Searching inmate information on the California Department of Corrections and/or
5 LOS ANGELES County Sheriff Department website(s)

6 _____ Conducting an Internet Search

7 _____ facebook or other social media site _____, yellow pages _____

8 _____ Calling/ _____ texting the following telephone number(s): _____

9 _____ Sending an e-mail to the following e-mail address(es):

10 _____

11 _____ Contacting last known employer

12 _____ Speaking with the following friends and/or family members:

13 _____

14 _____

15 _____

16 _____ Other: _____

17 _____

18 _____

19 _____

20 _____

21 _____

22 I was not able to find the address(s) for the relative(s).

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

25 Executed this _____ day of _____, 20____.

27 _____
28 Declarant

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Mary Doe 345 Treetop Avenue, Apt 2, Los Angeles, CA 90000 TELEPHONE NO.: (111) 222-3333 FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): In Pro Per * (Spanish Speaking Only)	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: same CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Downtown Los Angeles	
GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name): Jane Doe and John Doe	
<input type="checkbox"/> CONSENT OF PROPOSED GUARDIAN <input checked="" type="checkbox"/> NOMINATION OF GUARDIAN <input checked="" type="checkbox"/> CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE	CASE NUMBER:

CONSENT OF PROPOSED GUARDIAN

1. I consent to serve as guardian of the person estate of the minor.

Date: _____

_____ ▶ _____
 (TYPE OR PRINT NAME) (SIGNATURE OF PROPOSED GUARDIAN)

NOMINATION OF GUARDIAN

2. I am a parent of the minor a donor of a gift to the minor. I nominate (name and address):

Mary Doe, 345 Treetop Avenue, Apt 2, Los Angeles, CA 90000
as guardian of the person estate of the minor.

3. I am a parent of the minor a donor of a gift to the minor. I nominate (name and address):

Gary Doe, 345 Treetop Avenue, Apt 2, Los Angeles, CA 90000
as guardian of the person estate of the minor.

Date: _____

Santiago Doe ▶ Santiago Doe
 (TYPE OR PRINT NAME) (SIGNATURE)

NOTICE: The guardian of the person of a minor child has full legal and physical custody until the child becomes an adult or is adopted, the court changes guardians, or the court terminates the guardianship. Parents or other interested persons must petition the court to terminate the guardianship. The court will not do so unless the judge decides that termination would be in the child's best interest.

CONSENT TO APPOINTMENT OF GUARDIAN AND WAIVER OF NOTICE

4. I consent to appointment of the guardian as requested in the *Petition for Appointment of Guardian of Minor*, filed on (date): . I am entitled to notice in this proceeding, but I waive notice of hearing of the petition, including notice of any request for independent powers contained in it. I waive timely receipt of a copy of the petition.

11/22/2020	Santiago Doe	▶	<u>Santiago Doe</u>	Father
DATE	(TYPE OR PRINT NAME)		(SIGNATURE)	RELATIONSHIP TO MINOR
		▶		
DATE	(TYPE OR PRINT NAME)		(SIGNATURE)	RELATIONSHIP TO MINOR
		▶		
DATE	(TYPE OR PRINT NAME)		(SIGNATURE)	RELATIONSHIP TO MINOR

Continued on Attachment 4.

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NUMBER: NAME: Mary Doe FIRM NAME: STREET ADDRESS: 345 Treetop Avenue, Apt 2 CITY: Los Angeles STATE: CA ZIP CODE: 90000 TELEPHONE NO.: (111) 222-3333 FAX NO.: EMAIL ADDRESS: ATTORNEY FOR (name): In Pro Per * (Spanish Speaking Only)	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: Same CITY AND ZIP CODE: Los Angeles 90012 BRANCH NAME: Downtown Los Angeles	
CHILD'S NAME: Jane Doe and John Doe	
PARENTAL NOTIFICATION OF INDIAN STATUS	CASE NUMBER:

To the parent, Indian custodian, or guardian of the above named child: You must provide all the requested information about the child's Indian status by completing this form. If you get new information that would change your answers, you must let your attorney, all the attorneys on the case, and the social worker or probation officer, or the court investigator know immediately and an updated form must be filed with the court.

1. Name: **Santiago Doe**
2. Relationship to child: Parent Indian custodian Guardian Other:

Indian Status

3. a. I am or may be a member of, or eligible for membership in, a federally recognized Indian tribe.
 Name of tribe(s) (name each): _____
 Location of tribe(s): _____
- b. The child is or may be a member of, or eligible for membership in, a federally recognized Indian tribe.
 Name of tribe(s) (name each): _____
 Location of tribe(s): _____
- c. One or more of my parents, grandparents, or other lineal ancestors is or was a member of a federally recognized tribe.
 Name of tribe(s) (name each): _____
 Location of tribe(s): _____
 Name and relationship of ancestor(s): _____
- d. I am a resident of or am domiciled on a reservation, rancheria, Alaska Native village, or other tribal trust land.
- e. The child is a resident of or is domiciled on a reservation, rancheria, Alaska Native village, or other tribal trust land.
- f. The child is or has been a ward of a tribal court.
- g. Either parent or the child possesses an Indian identification card indicating membership or citizenship in an Indian tribe.
 Name of tribe(s) (name each): _____
 Membership or citizenship number (if any): _____
- h. None of the above apply.
4. A previous form ICWA-020 has has not been filed with the court.

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

Date: **11/22/2020**

Santiago Doe
 (TYPE OR PRINT NAME)

▶ *Santiago Doe*
 (SIGNATURE)

Note: This form is not intended to constitute a complete inquiry into Indian heritage. Further inquiry may be required by the Indian Child Welfare Act.

TEMPORARY GUARDIANSHIP OF (Name): Jane Doe and John Doe	CASE NUMBER:
MINOR	

5. Notice of hearing to the persons named in item 2b is dispensed with.
6. a. Bond is not required. PERSON ONLY
- b. Bond is fixed at: \$ _____ to be furnished by an authorized surety company or as otherwise provided by law.
- c. Deposits of: \$ _____ are ordered to be placed in a blocked account at (specify institution and location): _____
- _____ and receipts shall be filed. No withdrawals shall be made without a court order. Additional orders in attachment 6c.
- d. The temporary guardian is not authorized to take possession of money or any other property without a specific court order.
7. In addition to the powers granted by law, the temporary guardian is granted other powers. These powers are specified in attachment 7. below (specify): _____

8. Other orders as specified in attachment 8 are granted.
9. Unless modified by further order of the court, this order expires on (date): _____
10. Number of boxes checked in items 4–9: _____
11. Number of pages attached: 0

Date:

JUDICIAL OFFICER

SIGNATURE FOLLOWS LAST ATTACHMENT

ATTORNEY OR PARTY WITHOUT ATTORNEY (name, address, and State Bar number):
 After recording, return to:
Mary Doe
345 Treetop Avenue, Apt 2
Los Angeles, CA 90000
 TEL NO.: (111) 222-3333 FAX NO. (optional):
 E-MAIL ADDRESS (optional):
 ATTORNEY FOR (name): **In Pro Per * (Spanish Speaking Only)**

SUPERIOR COURT OF CALIFORNIA, COUNTY OF **LOS ANGELES**
 STREET ADDRESS: **111 North Hill Street**
 MAILING ADDRESS: **same**
 CITY AND Z P CODE: **Los Angeles, CA 90012**
 BRANCH NAME: **Downtown Los Angeles**

FOR RECORDER S USE ONLY

TEMPORARY <input checked="" type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF (name): Jane Doe and John Doe	CASE NUMBER:
<input checked="" type="checkbox"/> MINOR <input type="checkbox"/> CONSERVATEE	

LETTERS OF TEMPORARY GUARDIANSHIP CONSERVATORSHIP
 Person Estate

FOR COURT USE ONLY

LETTERS

- (Name): **Mary Doe and Gary Doe**
 is appointed temporary guardian conservator of the person
 estate of (name): **Jane Doe and John Doe**
- Other powers that have been granted or restrictions imposed on the temporary
 guardian conservator are specified in Attachment 2.
 specified below:

- These Letters shall expire
 - on (date): _____ or upon earlier issuance of Letters to a general guardian or conservator.
 - on other date (specify): _____
- The temporary guardian conservator is not authorized to take possession of money or any other property without a specific court order.
- Number of pages attached: **0**

WITNESS, clerk of the court, with seal of the court affixed.

(SEAL)

Date: _____
 Clerk, by _____, Deputy

This form may be recorded as notice of the establishment of a temporary conservatorship of the estate as provided in Probate Code section 1875.

TEMPORARY <input checked="" type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF (name): Jane Doe and John Doe <div style="text-align: right; margin-top: 5px;"> <input checked="" type="checkbox"/> MINOR <input type="checkbox"/> CONSERVATEE </div>	CASE NUMBER:
---	--------------

NOTICE TO INSTITUTIONS AND FINANCIAL INSTITUTIONS
(Probate Code sections 2890–2893)

When these *Letters of Temporary Guardianship* or *Letters of Temporary Conservatorship* (Letters) are delivered to you as an employee or other representative of an *institution* or *financial institution* (described below) in order for the temporary guardian or temporary conservator of the estate (1) to take possession or control of an asset of the minor or conservatee named above held by your institution (including changing title, withdrawing all or any portion of the asset, or transferring all or any portion of the asset) or (2) to open or change the name of an account or a safe-deposit box in your financial institution to reflect the guardianship or conservatorship, you must fill out Judicial Council form GC-050 (for an institution) or form GC-051 (for a financial institution). An officer authorized by your institution or financial institution must date and sign the form, and you must file the completed form with the court.

There is no filing fee for filing the form. You may either arrange for personal delivery of the form or mail it to the court for filing at the address given for the court on page 1 of these Letters.

The temporary guardian or temporary conservator should deliver a blank copy of the appropriate form to you with these Letters, but it is your institution’s or financial institution’s responsibility to complete the correct form, have an authorized officer sign it, and file the completed form with the court. If the correct form is not delivered with these Letters or is unavailable for any other reason, blank copies of the forms may be obtained from the court. The forms may also be accessed from the judicial branch’s public Web site free of charge. The Internet address (URL) is www.courts.ca.gov/forms/. Select the form group *Probate—Guardianships and Conservatorships* and scroll down to form GC-050 for an institution or form GC-051 for a financial institution. The forms may be printed out as blank forms and filled in by typewriter, or may be filled out online and printed out ready for signature and filing.

An *institution* under California Probate Code section 2890(c) is an insurance company, insurance broker, insurance agent, investment company, investment bank, securities broker-dealer, investment advisor, financial planner, financial advisor, or any other person who takes, holds, or controls an asset subject to a conservatorship or guardianship other than a financial institution. Institutions must file a *Notice of Taking Possession or Control of an Asset of Minor or Conservatee* (form GC-050) for an asset of the minor or conservatee held by the institution. A single form may be filed for all affected assets held by the institution.

A *financial institution* under California Probate Code section 2892(b) is a bank, trust (including a Totten trust account but excluding other trust arrangements described in Probate Code section 82(b)), savings and loan association, savings bank, industrial bank, or credit union. Financial institutions must file a *Notice of Opening or Changing a Guardianship or Conservatorship Account or Safe-Deposit Box* (form GC-051) for an account or a safe deposit box held by the financial institution. A single form may be filed for all affected accounts or safe deposit boxes held by the financial institution.

LETTERS OF TEMPORARY GUARDIANSHIP CONSERVATORSHIP
AFFIRMATION

I solemnly affirm that I will perform according to law the duties of temporary guardian. conservator.

Executed on (date): _____, at (place): _____

Mary Doe and Gary Doe
(TYPE OR PRINT NAME)



(SIGNATURE OF APPO NTEE)

CERTIFICATION

I certify that this document, including any attachments, is a correct copy of the original on file in my office and that the Letters issued to the person appointed above have not been revoked, annulled, or set aside and are still in full force and effect.

(SEAL)

Date: _____

Clerk, by _____, Deputy

Addendum

1. In Pro Per * (Spanish Speaking Only)

APPENDIX G:
Sample Court Letter



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Dickerson Insurance Services
JEROME L. LEVINE
Holland & Knight LLP (Ret.)
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Southern California Edison (Ret.)
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Drooks, Lincenberg & Rhoads, P.C.
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Venable LLP
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Proskauer

*Past Chair



The nation's largest pro bono law firm

July 22, 2024

Olivia Doe
100 N Main Street
Los Angeles, CA 90001

RE: Guardianship Hearing/Olivia and Emily Doe

DATE: November 15, 2020

TIME: 10:30 AM

PLACE: Superior Court of Los Angeles, Dept. 9 (room 244), second floor

Dear Ms. Doe and Emily,

This letter is to inform you that the hearing for the legal guardianship of Emily has been set for November 15, 2023.

The hearing will be held at 10:30 AM at the Superior Court of Los Angeles, Stanley Mosk Courthouse. The court is located at 111 N. Hill Street, Los Angeles, CA 90012. The court is at the corner of 1st Street and Hill Street in downtown Los Angeles. Parking is available in parking lots close to the court and the cost is approximately \$20.00. The Wells Fargo parking lot is located on the corner of Hill Street and 2nd Street with the approximate cost of \$17.00. The Metro B/Red Line and the D/Purple Line stop across the street, at Civic Center.

When you enter the court at the main entrance, please use the escalator or the elevator to the second floor. Please proceed down the hall to Department 9.

Please arrive approximately at 10:00 AM as it is important to be on time for the hearing. You should both come to the hearing. Please dress appropriately for court.

If you have any questions, please call me at (213) 666-7777.

Sincerely,
Ylianna Perez-Guerrero
Supervising Attorney
Guardianship Clinic | Public Counsel

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Founder

APPENDIX H:
Sample Declarations of
Due Diligence



1 Sara Van Hofwegen (SBN 266985)
Public Counsel
2 610 S. Ardmore Avenue
Los Angeles, CA 90005
3 Tel: (213) 385-2977, ext. 212
Fax: (213) 385-9089
4 Email: SVan@publiccounsel.org

5 Pro Bono Attorney for Petitioner
6 [REDACTED]

7
8 SUPERIOR COURT OF THE STATE OF CALIFORNIA
9 FOR THE COUNTY OF LOS ANGELES
10 CENTRAL BRANCH

11
12 In Re

13 [REDACTED]

14 Petitioner,

CASE NO. [REDACTED]

**DECLARATION OF DUE DILIGENCE
REGARDING SERVICE OF NOTICE OF
HEARING FROM DANIEL SANCHEZ**

HEARING:

Date: [REDACTED]

Time: [REDACTED] pm

Dept.: 2D

Judge: [REDACTED]

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1 I, Daniel Sanchez, declare:

- 2 1. My name is Daniel Sanchez. I am a paralegal at Public Counsel, where I work under the
3 supervision of attorney Sara Van Hofwegen. I have personal knowledge of the facts set
4 forth in this declaration and could completely testify to them if called to do so. I am
5 bilingual in English and Spanish.
- 6 2. Sara Van Hofwegen is the Pro Bono attorney for the Petitioner in this matter.
- 7 3. On behalf of Petitioner, I exercised due diligence in attempting to provide notice of
8 Petitioners' upcoming guardianship hearing to his biological father, [REDACTED]
9 [REDACTED], his paternal grandparents, [REDACTED], and his maternal
10 grandparents, [REDACTED]. However, I was unable to provide
11 notice because Petitioner's biological father, paternal and maternal grandparents are
12 deceased.
- 13 4. On November 23, 2020 at 11:25 AM, I called Petitioner's sister, [REDACTED]
14 [REDACTED], at 323-[REDACTED]. A female answered in Spanish and identified herself as [REDACTED]
15 [REDACTED] the Petitioner's sister. I explained to [REDACTED] that I needed to
16 confirm that Petitioner's biological father, paternal and maternal grandparents were
17 deceased. Both [REDACTED] and Petitioner had informed me previously that Petitioner's
18 biological father, paternal and maternal grandparents were deceased, but I needed to
19 confirm this fact in order to perform due diligence in providing notice. [REDACTED] confirmed
20 that Petitioner's biological father, [REDACTED] [REDACTED] his paternal grandparents,
21 [REDACTED] and [REDACTED] and his maternal grandparents, [REDACTED] and [REDACTED]
22 [REDACTED], were deceased.
- 23 5. I then also asked [REDACTED] if Petitioner was available to confirm that his biological father,
24 [REDACTED] [REDACTED], his paternal grandparents, [REDACTED] and [REDACTED]
25 and his maternal grandparents, [REDACTED] and [REDACTED], were deceased. [REDACTED]
26 said that he was and put him on the phone. A male answered in Spanish and identified
27 himself as [REDACTED] the Petitioner. I explained to [REDACTED] that I needed
28 to confirm that his biological father, his paternal and his maternal grandparents were

1 deceased. [REDACTED] confirmed that, yes, his biological father, [REDACTED] [REDACTED] his
2 paternal grandparents, [REDACTED] and [REDACTED] and his maternal grandparents,
3 [REDACTED] and [REDACTED], were deceased.

4 6. I asked [REDACTED] and Petitioner if they could provide me with contact information for anyone
5 in Guatemala who could confirm that Petitioner's biological father, paternal and maternal
6 grandparents were deceased. [REDACTED] stated that she could give me the contact information
7 for her and Petitioner's sister, [REDACTED]

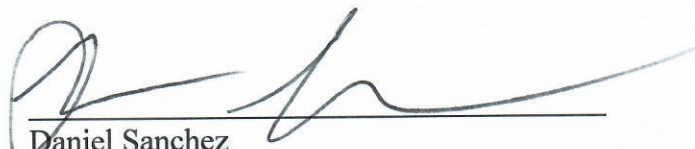
8 7. On November 30, 2020 at 11:16 AM, I called [REDACTED] at [REDACTED]
9 [REDACTED]—the number that [REDACTED] had provided me with. A young woman answered in Spanish
10 and identified herself as [REDACTED] Petitioner's sister. I explained to
11 [REDACTED] that I was attempting to confirm that Petitioner's biological father, [REDACTED] [REDACTED]
12 [REDACTED] Petitioner's paternal grandparents, [REDACTED] and [REDACTED] and
13 Petitioner's maternal grandparents, [REDACTED] and [REDACTED] were deceased.
14 [REDACTED] stated that she could confirm this, and that her and Petitioner's mother, [REDACTED]
15 [REDACTED] was present as well. A female came on the line and identified herself as
16 [REDACTED] I then asked them both if they could confirm that
17 Petitioner's biological father, [REDACTED] [REDACTED] his paternal grandparents, [REDACTED]
18 [REDACTED] and [REDACTED] and his maternal grandparents, [REDACTED] and [REDACTED]
19 [REDACTED] were deceased. [REDACTED] stated that this was correct and [REDACTED]
20 [REDACTED] stated that this was correct.

21 8. On behalf of the Petitioner, I have exercised due diligence in attempting to locate
22 Petitioner's biological father, [REDACTED] [REDACTED] his paternal grandparents, [REDACTED]
23 [REDACTED] and [REDACTED] and his maternal grandparents, [REDACTED] and [REDACTED]
24 [REDACTED]. They could not be located because they are all deceased [REDACTED]

1 I declare under penalty of perjury of the laws of the State of California that the information above is
2 true and correct. This declaration was executed on December 3, 2020 in Los Angeles, California.

3 Dated: 12/3/20

4 Respectfully Submitted,

5 
6 _____
7 Daniel Sanchez

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1 Rebecca Brown (SBN 345805)
2 Public Counsel
3 610 S. Ardmore Avenue
4 Los Angeles, CA 90005
5 Tel: (213) 385-2977, ext. 235
6 rbrown@publiccounsel.org
7 Pro Bono Attorney for Petitioner
8 [REDACTED]

9 SUPERIOR COURT OF THE STATE OF CALIFORNIA
10 FOR THE COUNTY OF LOS ANGELES
11 CENTRAL DISTRICT

12 In Re

13 [REDACTED]

14 Petitioner,

15 and

16 [REDACTED]

17 Respondent.
18
19

CASE NO. [REDACTED]

**DECLARATION OF DUE DILIGENCE
FROM YONNY AGUILAR ESPINOZA
REGARDING NOTICE OF HEARING**

HEARING:

Date: 8/22/2023

Time: 8:30

Dept: 6

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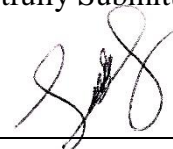
1 I, Yonny Aguilar Espinoza, declare:

- 2
- 3 1. My name is Yonny Aguilar Espinoza. I am a paralegal at Public Counsel, where I work
- 4 under the supervision of attorney Joel Frost-Tift. Mr. Frost-Tift is currently on leave and I
- 5 am working under the supervision of attorney Rebecca Brown. I have personal knowledge
- 6 of the facts set forth in this declaration and could completely testify to them if called to do
- 7 so.
- 8 2. I am bilingual in English and Spanish.
- 9 3. Joel Frost-Tift is the Pro Bono attorney for the Petitioner in this matter.
- 10 4. On behalf of Petitioner [REDACTED] (“Petitioner”), I exercised due
- 11 diligence in order to provide with notice of these proceedings to petitioner’s father, [REDACTED]
- 12 [REDACTED]. However, I was unable to provide notice because the location and contact
- 13 information of the Petitioner’s father, [REDACTED] is unknown and cannot be
- 14 ascertained.
- 15 5. On June 26, 2023 at 2:00 pm, I called Petitioner’s mother, [REDACTED]. During
- 16 this call, I explained to [REDACTED] that I needed to provide notice about these proceedings to
- 17 Petitioner’s Father, [REDACTED]. [REDACTED] told me that she has not seen the Petitioner’s
- 18 father since around 2005 and that she does not know [REDACTED]’s location or contact
- 19 information.
- 20 6. On June 26, 2023 at 3:00 pm, I called the General Consulate of El Salvador in Los
- 21 Angeles. When I connected with a representative of the consulate, I stated that that I
- 22 needed assistance in locating a Salvadorian National but only had the name of the person
- 23 and last known town of residence but no other information. The woman on the phone
- 24 explained to me that the consulate only has a service to locate family members separated
- 25 during the civil war. Ultimately, the consulate staff were unable to process my request
- 26 because El Salvador does not keep a national registry of people’s addresses and contact
- 27 information. Consequently, they were not able to help me just by using the name of
- 28 Petitioner’s father.

- 1 7. On June 26, 2023, at 3:30 pm, I attempted to locate any available information regarding
2 [REDACTED]'s whereabouts via an online search on Facebook.com and Google.com. I
3 searched using the following term: "[REDACTED]"
- 4 8. Using these search terms, I found several apparent matches – Facebook profiles of
5 individuals with the name [REDACTED]. However, these profiles did not contain a
6 location.
- 7 9. I then conducted an online search for Petitioner's father on the whitepages.com and
8 yellowpages.com websites. My online searches did not produce any additional
9 information that matched Petitioner's biological father's name, nor did I find accurate
10 results on the location of [REDACTED].
- 11 10. On June 26, 2023 at 3:45 pm, I conducted an online search on Google and Bing. My
12 online search for Petitioner's father on these websites did not produce any additional
13 information that matched. I then conducted an online search for Petitioner's father on the
14 website Peoplesmart.com. I was unable to find Petitioner's father, [REDACTED], on
15 their website because it is only for US based persons.
- 16 11. On behalf of the Petitioner, I have exercised due diligence in attempting to provide notice
17 to her father, [REDACTED].

18 I declare under penalty of perjury of the laws of the State of California that the information above is
19 true and correct. This declaration was executed on June 26, 2023 in Los Angeles, California.

20
21 Respectfully Submitted,

22 

23 _____
24 Yonny Aguilar Espinoza

APPENDIX I:
Information Regarding
Court Investigations



PROBATE GUARDIANSHIP INVESTIGATIONS

The probate guardianship investigation will differ depending on whether the proposed guardian is related or not related to the minor. If at least one of the proposed guardians is related to the minor, the court investigator's office will conduct the investigation. If the guardians are not related to the minor, a social worker from the Department of Children and Family Services (DCFS) will conduct the investigation. The purpose of a probate investigation for a Petition to Appoint a Guardian is to "guarantee the safety of the minor" to the court. The court investigator or social worker will prepare a written report to the court. The report will generally recommend the guardianship, not recommend the guardianship, or indicate "no recommendation." The report is confidential and not made a part of the public court file, but a copy may be provided to a party in a guardianship case. The minor's attorney can and should obtain a copy. The report is available to attorney of record via the LA Superior Court Attorney Portal. The attorney can also request a copy at the courthouse's records office

Investigations by Court Investigator's Office:

Interviews:

Approximately 2-3 weeks before the hearing, the proposed guardian will receive a letter in the mail or email notifying her/him of an appointment for a Case Review Conference. The conferences are usually held in Room 233 at the court located at 111 N. Hill Street, Los Angeles, CA 90012. The proposed guardian(s), the children, and all members of the household who act in a parental role with respect to the child are required to be present. The investigator will generally speak privately with each member of the household, as well as conduct criminal background checks on all persons over 18.

Depending on the age of the child, the investigator may speak with the child separately from the adults. The investigator generally asks questions to assess whether the child feels comfortable and safe in the care of the proposed guardian. The investigator typically asks the minor where his parents are and when she last saw them, how the child feels about each member of the household and her feelings toward the proposed guardian.

The notice sent to the proposed guardian will ask the guardian to provide certain documents, including school and medical records, evidence of residency, birth certificates of children etc. The investigator may, if she deems it necessary, contact the minor's school. If the child has recently been placed with the proposed guardian, the guardian may not have been able to collect records, take the child to the doctor or enroll the child in school. The investigator will make an assessment based on the proposed guardian's statement and demonstrated degree of care for the minor.

If the investigator feels, based on the interview, that more information is necessary, the investigator may decide to conduct an inspection of the proposed guardian's home. Further, if there are other reasons for concern, such as if any member of the household has a criminal history or recent child abuse reports, there is an increased level of scrutiny. For most criminal offenses, the investigator takes into account how recent and severe is the offense, as well as any demonstration of rehabilitation. Criminal offenses are taken into account as a part of the whole situation in the home. The investigator may recommend that the court refer the family to the DCFS to determine if it is necessary to open a dependency case for the child and place the child in foster care.

Objections:

The proposed guardian is responsible for notifying the parents of the case conference. Parents do not have to attend the case conference unless they are contesting the guardianship or wish to provide information in support of it. If a parent objects to the appointment of the proposed guardian, the investigator will note it in the report. The investigator will try to "get a feel" for the situation to determine whether there is a legitimate cause for further investigation of the objection. If the parent objects at the court hearing it is likely to cause a continuance to allow a full probate investigation into the parent or the basis for objection. This is true even if the parent does not file a written Objection to the Petition to Appoint a Guardian.

The investigator will not generally directly contact second degree relatives that are not residing with the minor. However, any person receiving notice of the guardianship may call the probate investigator and report their objection, and their objection may be included in the report. If any person files an Objection to the Petition to Appoint a Guardian, it will trigger additional inquiry by the investigator's office and will be included in the investigator's report. Any objection may cause a continuance of the hearing if it requires further investigation.

Assessment of the Environment:

In some cases, the investigator may want to visit the proposed guardian's home before concluding their investigation. The assessment of the home is not intended to judge the quality of the neighborhood or building, rather to assess the safety and suitability of the home for a child. The safety determination will depend on the age of the minor, but could include such dangers as uncovered pools exposed wiring and the presence of inadequate locks on main entrances. With regard to suitability of the home, the investigator is generally looking for age appropriate accommodations for the child. While a small child may be fine sleeping in the guardian's bed or in a playpen, an older minor requires their own bed. The proposed guardian is not required to have a separate bedroom for the minor.

In sum, the investigation is carried out by a reasonable person assessing the situation in light of the best interests of the child. Each investigation will be different based on the circumstance and what is uncovered during the investigation. An investigator will "get a feel" for the situation and ask questions directed to explore any area that may lead to a conclusion that the petitioner is not being honest or that the child is not best served by the appointment of the proposed guardian.



JOHN A. CLARKE
EXECUTIVE OFFICER/ CLERK

111 NORTH HILL STREET
LOS ANGELES, CA 90012-3014

*Superior Court of
California County
Of Los Angeles*

ABOUT YOUR CASE REVIEW CONFERENCE

When seeking guardianship of a child/ren to whom you are related, you must participate in a Probate Investigation. Your Probate Investigation will take place at the time of your Case Review Conference. Since the investigation involves interviews and review of other information, you and the children may be involved in this process for a minimum of two to four hours. Please plan accordingly.

The Probate Investigator will be meeting with you and the child/ren to obtain information regarding the social history of the proposed guardians, the parents, and the child/ren. The Investigator will prepare a report to the Court based on the information you provide on the questionnaire, the investigator's observation in the interviews and additional collateral information as deemed appropriate.

You will also be meeting with a court employee who assist you in preparing your legal notice and ensure all necessary documents have been included in your legal file.

Please bring the child/ren for your scheduled appointment. Enclosed is information regarding the Children's Waiting Room. If you choose not to send the children to the waiting room, you must bring another adult to care for the child/ren while you are being interviewed.

You are responsible for notifying the parents, if possible, of this appointment. The parents do not have to be present unless they are contesting the guardianship or wish to provide information in support of any adult living in the home and acting in a parental role, who should be present for the interview.

Copies of the following documents must be submitted to the Probate Investigator on the day of your Case Review Conference.

1. Minor's school records, last report cards, progress reports, IEPs, school enrollment forms, etc.
2. Medical records, immunization records, Medi-Cal cards, date of last physical examination
3. Evidence of residence, such as: Mortgage statement, rental receipts, lease agreement or utility bills showing the Petitioner as the payer at the property stated to be home for the minor.
4. Birth certificates of the children.
5. Death certificates if parents are deceased.
6. Names of all persons residing in the household and their personal information such as date of birth, driver's license number and social security number.
7. Names and addresses of all individuals who require legal notice.
8. List of medical conditions and medications prescribed for the proposed guardian(s).

You will avoid delays in your Investigation by providing these documents to the Probate Investigator on the day of your scheduled appointment.

If you have any questions, please contact the Probate Investigators' Office at 213/830-0855.

Investigations by Department of Children and Family Services:

All Petitions for Appointment of a Guardian made by non-relatives are referred to DCFS for investigation. In addition, the probate investigator has the discretion to recommend that the court request an investigation by DCFS (generally if the investigator believes that the child is at risk of abuse, or neglect in the proposed guardian's home). A referral to DCFS does not always result in the case being handled in dependency court.

The DCFS social worker will call the proposed guardian to make an appointment for the investigation. The DCFS investigations are generally more involved than those completed by the probate investigator's office. The social worker will generally do the following in order to determine whether the proposed guardian is a suitable caretaker for the child:

1. **Criminal Records Clearance:**
Background checks are done for all adults living in the home that include criminal records and child abuse records. If Customs and Border Patrol (CBP) has ever apprehended the individual at the border, the background check will likely reflect this. However, the probate court will not share information about the individual with ICE. A judge is unlikely to mention this or raise concerns during a hearing. However, attorneys should discuss this with individuals subjected to background checks and be prepared to answer any questions about this during the hearing.
2. **Caregiver qualifications:**
Caregivers must be able to provide supervision for the child and demonstrate an ability to meet the child's specific needs
3. **Home Environment Approval:**
The social worker will assess the home with respect to the following:
 - Adequate bedroom space is provided.
 - Telephone service is operational at the home.
 - Home appears to be safe clean sanitary and in good repair.
 - Indoor and outdoor halls stairs, ramps, and porches are free of obstructions and hazards.
 - Home contains at least one toilet sink tub or shower maintained in safe and clean operating conditions.
 - Bunk beds of more than two tiers are not permitted.
 - Home is maintained at a comfortable temperature at all times.
 - Child's safety is ensured in homes with fireplaces, open forced heaters and wood stoves.
 - Lamps and necessary light is provided in rooms and other areas to ensure comfort and safety of all persons in the home.
 - Home has indoor sprinkling system or functioning smoke detector installed in the hallways of each sleeping area that are audible in each bedroom or sleeping area.
 - Hot water from faucets is delivered at a safe temperature.
 - Medicines, disinfectants, cleaning solutions, poisons, firearms and other dangerous items are stored where inaccessible to children.
 - Storage areas of firearms and other dangerous weapons are locked or in lieu of locked storage the applicant is utilizing trigger locks. Ammunition is stored and locked separately from firearms.
 - Solid waste is stored, located and disposed of in a manner that will not permit the transmission of communicable diseases or of odors, create a nuisance or provide a breeding ground or food source for insects or rodents.
 - Each sleeping room has one operable window or door that ensures safe and direct emergency exit to the outside. If security bars are used, the window is considered safe only if equipped with a safety release device.
 - Yard or outdoor space is provided free from hazards to life and health.
 - All pools must have appropriate covers and or pool gate locks.

APPENDIX J:
**Sample Forms for Good Exception to
Notice in Temporary Guardianship**



1 Attorney Name/Bar Number
Name of Firm
2 Address
City, State, Zip

3 Tel:
4 Fax:

5 Attorney for Petitioner
Name of Petitioner
6
7
8

9 SUPERIOR COURT OF THE STATE OF CALIFORNIA
10 COUNTY OF LOS ANGELES

11
12 In Re the Guardianship of the Person) Case No.
13 Of)
14) Application and Memorandum for Temporary
15) Guardianship Good Cause Exception to Notice
16) PC § 2250(e)
17) DATE:
18) TIME:
19) PLACE:
20)

21 Petitioner(s) requests that the court:

22 _____ Waive notice to following person(s)

- 23 Mother _____
24 Father _____
25 _____
26

27 _____ Shorten the period of notice
28

1 _____ Permit notice to be effected by:

- 2 Telephone
- 3 Fax
- 4 Email
- 5 Combination of the above methods

6 Pursuant to PC § 2250€, and Cal. Rule of Court 7.1012, this request is made for the following
7 reasons:

9 _____ Harm by the passage of time: There will be immediate and substantial
10 harm to the ward or the ward's estate that could occur during the notice
11 period. Person(s) entitled to notice might cause immediate and substantial
12 harm to the ward(s) or the ward's estate if the notice is given.

- 13 There is a possibility that the person entitled to notice might abduct the child.
- 14 The person entitled to notice may contact the person(s) who might cause harm.

15 _____ the proposed ward's custodial parent is deceased or incapacitated and the
16 petitioner is the custodial parent's nominee.

17 _____ Immediate and substantial medical emergency. The medical treatment is
18 reasonably unavailable unless a temporary guardian is appointed AND the
19 treatment cannot be deferred for the notice period because the ward(s) is
20 suffering extreme pain and discomfort or there exists a significant risk of
21 harm.

22 _____ Immediate and substantial financial emergency. Other means are
23 ineffective in preventing significant loss or future loss to the proposed
24 ward's estate or loss of support for the proposed ward during the notice
25 period.

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Respectfully submitted:

Date:

Attorney's Name

Signature

VERIFICATION

I, _____, am the petitioner in this action. I have read the foregoing petition and it is true of my own knowledge, except as to those matters stated on information or belief, and as to those matters, I believe it to be true.

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

Date: _____

Signature of Petitioner

1 Attorney Name/Bar Number
Name of Firm
2 Address
City, State, Zip

3 Tel:
4 Fax:

5 Attorney for Petitioner
Name of Petitioner

7 SUPERIOR COURT OF THE STATE OF CALIFORNIA
8 COUNTY OF LOS ANGELES

10
11 In Re the Guardianship of the Person) Case No.
12 Of)
13) Declaration in Support of Application for
14) Temporary Guardianship Good Cause
15) Exception to Notice (PC § 2250(e))
16) DATE:
17) TIME:
18) PLACE:
19)

20 I, _____, declare as follows:

- 21 1. I am the petitioner/proposed guardian in this action. I make this declaration from
22 personal knowledge and if called as a witness could and would testify
23 competently thereto.
24 2. I request that the court permit a good cause exception to notice requirement on my
25 Petition for Temporary Guardianship for the following reasons:
26

27 _____
28 _____

1 3. Notice to the following individuals was completed as follows:

2 a. MOTHER

3 Not served. The following is a list of things that I did/people I
4 spoke with to try to find the father:
5

6
7 Telephone at the following number: _____

8 Fax at the following number: _____

9 E-mail

10 Other: _____

11 Date and time of service: _____

12
13 b. FATHER

14 Not served. The following is a list of things that I did/people I
15 spoke with to try to find the mother:
16

17
18 Telephone at the following number: _____

19 Fax at the following number: _____

20 E-mail

21 Other: _____

22 Date and time of service: _____

23 c. MINOR AGE 12 OR OLDER

24 Not served. The following is a list of things that I did/people I
25 spoke with to try to find the father:
26

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28 Telephone at the following number: _____

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Fax at the following number: _____

E-mail

Other: _____

Date and time of service: _____

d. GUARDIAN/OTHER PERSON WITH LEGAL CUSTODY OF MINOR

Not served. The following is a list of things that I did/people I spoke with to try to find the father:

Telephone at the following number: _____

Fax at the following number: _____

E-mail

Other: _____

Date and time of service: _____

I declare under penalty of perjury that the foregoing is true and correct.

Date:

Name

Signature

1 Attorney Name/Bar Number
Name of Firm
Address
2 City, State, Zip

3 Tel:
4 Fax:

5 Attorney for Petitioner
Name of Petitioner
6

7 SUPERIOR COURT OF THE STATE OF CALIFORNIA
8 COUNTY OF LOS ANGELES
9

10
11 In Re the Guardianship of the Person) Case No.
12 Of)
13) Order re: Temporary Guardianship Notice
14) PC § 2250(e)
15) DATE:
16) TIME:
17) PLACE:
18)
19)

20 The Application for Temporary Guardianship Good Cause Exception to Notice came on for
21 hearing as follows:
22

23 Judge (name): _____

24 Hearing Date: _____ Time: _____ Dept.: _____

25 Persons Who Appeared: _____
26
27
28

1 The court finds that good cause exists for an exception to the temporary guardianship notice
2 requirements.

3
4 The Court ORDERS:

5 Notice to the following individuals is dispensed with:

- 6 Mother
- 7 Father
- 8 Other Person: _____
- 9

10 different manner/time period of notice is permitted for the following individuals:

- 11 Mother
- 12 Father
- 13 Other Person: _____
- 14

15
16 Date: _____

17 Superior Court Judge

APPENDIX K:
Sample Ex Parte for
Age Out



1 SARA VAN HOFWEGEN (Cal. Bar. No. 266985)
2 PUBLIC COUNSEL
3 610 S. Ardmere Avenue
4 Los Angeles, CA 90005
5 Tel: (213) 385-2977
6 Fax: (213-385-9089

7 Attorney for Petitioner,
8 [REDACTED]

9
10 **SUPERIOR COURT OF THE STATE OF CALIFORNIA**
11 **COUNTY OF LOS ANGELES**
12

13 In Re Guardianship of
14 [REDACTED]
15 [REDACTED]
16 [REDACTED]

17 CASE NO. [REDACTED]

18 **EX PARTE MOTIONS TO ADVANCE**
19 **HEARING ON GUARDIANSHIP PETITION**
20 **AND REQUEST FOR SPECIAL**
21 **IMMIGRANT JUVENILE FINDINGS;**
22 **DECLARATION OF COUNSEL IN**
23 **SUPPORT AND REGARDING EX PARTE**
24 **NOTICE; MEMORANDUM OF POINTS**
25 **AND AUTHORITIES; SUPPORTING**
26 **DOCUMENTS**

27 **HEARING:**

28 Date: [REDACTED]
Time: 10:30AM
Dept: [REDACTED]

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2 **DECLARATION OF COUNSEL IN SUPPORT OF**
3 **PETITIONER'S EX PARTE APPLICATION**

4 I, Sara Van Hofwegen, declare as follows:

5 1. I am an attorney admitted to practice law in the State of California and am
6 presently employed with Public Counsel. I am the *pro bono* attorney of record for the 20-year-old
7 Minor Petitioner, [REDACTED] (hereinafter, "[REDACTED]") in the above
8 entitled action.

9 2. The facts set forth in this Declaration are within my personal knowledge, and if
10 called to testify regarding such facts, I could and would do so competently. I offer this Declaration
11 in lieu of personal testimony, pursuant to Sections 2009 and 2015.5 of the California Code of Civil
12 Procedure, Rule 1225 of the California Rules of Court, *Reifler v. Superior Court*, 39 Cal.App.3d
13 479 (1974), and *Marriage of Stevenot*, 154 Cal.App.3d 1051 (1984).

14 3. I make this Declaration in support of [REDACTED]'s *ex parte* application to advance
15 The hearing on her petition for guardianship and request for Special Immigrant Juvenile findings
16 ("SIJ Findings") to on or before October 19, 2022.

17 4. On September 14, 2022, [REDACTED] filed her petition for guardianship and request
18 for SIJ Findings, requesting that her father, [REDACTED] ("[REDACTED]") be
19 appointed her legal guardian. [REDACTED]'s request for SIJ Findings comes after the California
20 Supreme Court's decision in *Guardianship of Saul H.*, 2022 Cal. LEXIS 4767, 2022 WL 3349241,
21 which found that failure to protect from gang violence constitutes "a similar basis" to neglect
22 under California law and can form the basis for SIJ Findings in California.

23 5. [REDACTED]'s matters were scheduled for a hearing on November 30, 2022, after
24 [REDACTED] turns 21 on October [REDACTED], 2022.

25 6. [REDACTED] now comes and respectfully requests an order shortening time for
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1 hearing to on or before October [REDACTED], 2022, and to place [REDACTED] under the guardianship of her
2 father pursuant to Probate Code section 1510.1(a). [REDACTED] also requests that the Court make the
3 necessary findings regarding Special Immigrant Juvenile Status pursuant to the California Code of
4 Civil Procedure Section 155 and the California Supreme Court's recent decision in *Guardianship*
5 *of Saul H.*, 2022 Cal. LEXIS 4767, 2022 WL 3349241.

6
7 7. Granting [REDACTED]'s *ex parte* application is proper under California Rule of
8 Court 5.151 because it will prevent irreparable harm to her. [REDACTED] cannot wait to appear at her
9 scheduled hearing because she will have reached twenty-one years of age. [REDACTED]'s birthday is
10 on October [REDACTED], 2022. Failing to advance [REDACTED]'s hearing will be especially harmful to
11 [REDACTED] because under Probate Code section 1510.1, the Court will lose jurisdiction over the
12 matter when she reaches her 21st birthday. If [REDACTED] is not granted guardianship of [REDACTED] before
13 her 21st birthday, then she will be unable to benefit from the permanency and stability that comes
14 from a guardianship. (*See* Assem. Bill No. 900 (2015-2016 Reg. Sess.), § 1(a)(6).) Moreover, this
15 Court will be unable to make the requested SIJ Findings, which would then foreclose [REDACTED]
16 from applying for Special Immigrant Juvenile Status with the United States Citizenship and
17 Immigration Services, preventing [REDACTED] from obtaining lawful status in the United States and
18 potentially resulting in [REDACTED]'s removal to a country where she faces gang violence and other
19 harm.
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21
22 8. Denial of [REDACTED]'s *ex parte* application for an order shortening time for
23 hearing could result in her deportation from the United States. This would cause [REDACTED] to be
24 separated from her young daughter (who has already been granted Special Immigrant Juvenile
25 Status) and her father, thereby terminating the only parental protection available to her. Moreover,
26 in El Salvador, [REDACTED]'s boyfriend was murdered by gang members and she faced threats from
27 violent gang members. If [REDACTED] were forced to return to her native country of El Salvador, she
28

1 would face a high likelihood of gang violence or other harm.

2 9. Notice under rule 3.1204 is not required as there are no opposing parties in this
3 Matter. (*Cal. Rules of Ct.*, rule 3.1201(3).) However, all required notices of the guardianship
4 petition and request for SIJ Findings have been completed. Mr. [REDACTED], the proposed
5 guardian and [REDACTED]'s father, submitted a waiver of notice for these proceedings. [REDACTED]'s
6 mother, [REDACTED] was personally served with the guardianship petition and request
7 for SIJ Findings. [REDACTED]'s maternal and paternal grandmothers also waived notice of these
8 proceedings, and notice to her maternal and paternal grandfathers should be waived because their
9 whereabouts are unknown and cannot be ascertained with due diligence. Moreover, I personally
10 gave notice of the *ex parte* application to [REDACTED]'s father and mother via phone. Mr. [REDACTED]
11 [REDACTED] stated that he agrees with the request and will be available to appear remotely for a hearing
12 on the *ex parte* request, the guardianship petition, and the Request for SIJ Findings. Ms. [REDACTED]
13 stated that she has no objection to the *ex parte* proceedings but does not plan to attend any
14 hearings. My paralegal and legal assistant also spoke to [REDACTED]'s grandmothers and informed
15 them of the *ex parte* application. Neither grandmother plans to attend any hearings in these
16 proceedings.

17 10. [REDACTED] requests that this Court grant her *ex parte* application for an order
18 shortening time for hearing.

19
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21 I declare under penalty of perjury under the laws of the State of California that the
22 foregoing is true and correct.

23
24 DATED: October 12, 2022



25
26 Sara Van Hofwegen, Declarant

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1 **MEMORANDUM OF POINTS AND AUTHORITIES**

2 Petitioner, [REDACTED], hereby requests that the hearing set before this
3 Court on November [REDACTED], 2022, concerning her Guardianship Petition and Request for Special
4 Immigrant Juvenile Findings be advanced to at least five days prior to her 21st birthday, which is
5 October [REDACTED], 2022.

6 **I. BACKGROUND**

7
8 Petitioner is a 20-year-old minor from El Salvador who will turn 21 years old on
9 October [REDACTED], 2022. On September [REDACTED], 2022, Petitioner filed a Petition for Appointment of
10 Guardian(GC-210) asking that the Court appoint her father, [REDACTED] ("
11 Proposed Guardian") as her legal guardian. Concurrently, Petitioner also filed a Confidential
12 Request for Special Immigrant Juvenile Findings ("SIJ Findings") (GC-220), asking that the
13 Court find that reunification with her mother is not viable based on abandonment and neglect
14 and that it is not in her best interest to be returned to El Salvador, where her boyfriend was
15 murdered and where she faced gang violence. These findings are necessary for Petitioner to
16 apply for Special Immigrant Juvenile Status ("SIJS") with U.S. Citizenship and Immigration
17 Services ("USCIS") and to prevent her deportation to the country where she was abused and
18 abandoned.
19

20 A hearing on Petitioner's guardianship petition and request for SIJ Findings
21 was initially set for November 30, 2022. The hearing date falls after Petitioner's 21st
22 birthday, which is October [REDACTED], 2022.

23 **II. LEGAL ARGUMENT**

24
25 An ex parte motion to advance a hearing date must be based on good cause and a showing
26 of irreparable harm. (Cal. Rules of Court, rules 3.1202(c), 3.1335(b).) Petitioner asks that the
27 hearing on her guardianship petition and request for SIJ findings be advanced to a date at least five
28 days preceding her 21st birthday to avoid irreparable harm to her best interest. (*See* Fam. Code, §

1 3011.) First, advancing the hearing date would avoid irreparable harm to Petitioner's immigration
2 matter, putting her in the best position to defend herself from deportation to El Salvador, where
3 she was neglected and faced gang violence. Second, advancing the hearing date would
4 promote Petitioner's longterm wellbeing by enabling her to benefit from the permanency and
5 stability a guardianship provides.

6 [REDACTED] cannot wait for her scheduled hearing because she will have reached 21 years of
7 age. [REDACTED]'s birthday is on October [REDACTED], 2022. Denial of this ex parte motion is especially
8 harmful to [REDACTED] because under Probate Coder section 1510.1, the Court will lose jurisdiction
9 over the matter when she reaches her 21st birthday. If [REDACTED]'s hearing is not advanced, this
10 court will be unable to place her under the guardianship of [REDACTED] or make Special Immigrant
11 Juvenile Findings for her. [REDACTED] will also be unable to apply for Special Immigrant Juvenile
12 Status with the United States Citizenship and Immigration Services unless she received SIJ
13 Findings and submits her SIJS application to USCIS prior to her 21st birthday. (*See* 8 C.F.R.
14 204.11(b).) As a result, she will be unable to obtain lawful status in the United States through SIJS
15 and be at risk of removal to a country where she faces gang violence and other harm. Moreover,
16 removal from the United States would cause [REDACTED] to be separated from her young daughter
17 (who has been granted SIJS) and her father, thereby terminating the only parental protection
18 available to her.

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22 Additionally, advancing [REDACTED]'s hearing will allow her to reap the benefits of a legal
23 guardian. In expanding guardianship to youth ages eighteen to twenty-one, the California
24 legislature found these guardianships:

25
26 particularly necessary in light of the vulnerability of this class of unaccompanied youth,
27 and their need for a custodial relationship with a responsible adult as they adjust to a new
28 cultural context, language, and education system, and recover from the trauma of abuse,
neglect, or abandonment. These custodial arrangements promote permanency and the

1 longterm wellbeing of immigrant children present in the United States who have
2 experienced abuse, neglect, or abandonment.

3 (AB 900, § 1(a)(6)). [REDACTED], is a particularly vulnerable youth, who has suffered enormous loss
4 and faced violence in her short life. She needs a “custodial relationship” with [REDACTED] as she adjusts to
5 life in the United States “and recover[s] from the trauma of abuse, neglect, or abandonment” that
6 she has suffered. (*See id.*) Permanency and longterm wellbeing are particularly important in
7 [REDACTED]’s case as she is the young mother to a four-year-old daughter. Absent the guardianship,
8 [REDACTED] will be unable to benefit from a custodial relationship with [REDACTED].
9

10 **III. CONCLUSION**

11 Petitioner will suffer irreparable harm in her immigration matter if her hearing is not
12 advanced to a date proceedings her twenty-first birthday; therefore, based on her best interest,
13 Petitioner asks that this Court advance her hearing to on or before October [REDACTED], 2022.
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15 DATED: October 12, 2022

16 Respectfully Submitted,

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19 Sara Van Hofwegen
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LIST OF ATTACHMENTS

A. Form GC-211, Petition for Appointment of Guardian, Submitted September 14, 2022

B. Form GC-220, Request for Special Immigrant Juvenile Findings, Submitted September 14, 2022

C. Declaration of [REDACTED], Submitted September 14, 2022

Service Documents

D. Petitioner's Father, [REDACTED], Waiver of Notice

E. Petitioner's Mother, [REDACTED] Proof of Personal Service

F. Petitioner's Maternal Grandmother, [REDACTED], Waiver of Notice

G. Petitioner's Paternal Grandmother, [REDACTED], Waiver of Notice

H. Petitioner's Maternal Grandfather, [REDACTED], Declaration of Due Diligence

I. Petitioner's Paternal Grandfather, [REDACTED], Declaration of Due Diligence

J. Petitioner's Sister, [REDACTED], and DCFS, Proof of Service by Mail

K. Petitioner's Sister, [REDACTED], Waiver of Notice

1 Habiba Simjee, Esq. (SBN 304537)
UC Immigrant Legal Services Center
2 c/o Bruin Resource Center
220 Westwood Plaza, Suite B44
3 Los Angeles, CA 90095
Tel: 424.443.9653
4 Habiba.ucimm@law.ucdavis.edu

5 *Pro Bono* Attorney for Petitioner,
MINOR
6
7

8 SUPERIOR COURT OF THE STATE OF CALIFORNIA
9 COUNTY OF LOS ANGELES
10

11 In re Guardianship of
12 MINOR

) Case No.: [REDACTED]

) DECLARATION OF MINOR IN SUPPORT
) OF EX PARTE APPLICATION RE
) PERMANENT GUARDIANSHIP OF THE
) PERSON AND SPECIAL IMMIGRANT
) JUVENILE FINDINGS
)
)
)

15
16 I, MINOR, attest to the following:

- 17 1. I was born on [REDACTED] 1999. I will turn 21 years of age on [REDACTED] 2020.
18 2. I am petitioning this Court to grant my petitions for Permanent Guardianship of the
19 Person and for Special Immigrant Juvenile (SIJ) Findings ex parte, or, in the alternative,
20 to advance my hearings for permanent guardianship and SIJ findings. The hearing is
21 currently scheduled for January 11, 2020 at 11:00 am.
22 3. It is necessary that this court grant my petition for permanent guardianship before I turn
23 21 because U.S. Citizenship and Immigration Services must receive my application for
24

DECLARATION OF MINOR IN SUPPORT OF EX PARTE APPLICATION RE PERMANENT
GUARDIANSHIP OF THE PERSON AND SPECIAL IMMIGRANT JUVENILE FINDINGS

1 SIJ Status at least one day before my 21st birthday. With my SIJ Status application, I need
2 to include orders signed by this Court (GC-240 Order Appointing Guardian and GC-224
3 SIJ Findings) no later than Wednesday, [REDACTED] 2020 to ensure that USCIS receives
4 my SIJS petition by Thursday, [REDACTED] 2020 – the day before my birthday.

5 4. My mother, who is my Proposed Guardian, and my father both signed the GC-211
6 Consent to Appointment of Guardian and Waiver of Notice of the Guardianship and SIJ
7 Findings Petitions and my attorney already filed them. I have requested a waiver of
8 notice to my maternal grandfather because he is wheelchair bound and lives alone in the a
9 remote place in Acapulco, Mexico. I could not email him a GC-211 because he does not
10 know how to use the internet or scan his signature. He does not know how to use the
11 phone well either, and rarely picks up our calls. Because he is wheelchair bound, he
12 cannot go into town to pick up his mail, and packages take a long time to arrive where he
13 lives. All my other family members who are entitled to notice (my three other
14 grandparents) are deceased.

15 5. It will cause me irreparable harm if my permanent guardianship and SIJ findings are not
16 granted on or before [REDACTED] 2020, as I will likely lose my opportunity to obtain
17 permanent residency status in the United States. I currently have Deferred Action for
18 Childhood Arrivals (“DACA”), but given the political climate and efforts to end DACA,
19 I am very worried about deportation to Mexico. This is the only opportunity I have to
20 become a permanent resident and not be separated from my mother and my family here
21 in the U.S.

1 I declare under penalty of perjury that the foregoing is true and correct to the best of my
2 recollection and knowledge.

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4 Signed this September 18, 2020 in Los Angeles, California.

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7 MINOR
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1 Habiba Simjee, Esq. (SBN 304537)
UC Immigrant Legal Services Center
2 c/o UCLA Bruin Resource Center
220 Westwood Plaza, Ste. B44
3 Los Angeles, CA 90095-1453
Tel: 424-443-9653

4 *Pro Bono* Attorney for Petitioner,
5 MINOR

6 SUPERIOR COURT OF THE STATE OF CALIFORNIA
7 COUNTY OF LOS ANGELES

8
9 In re Guardianship of)
10 MINOR)

Case No.: ██████████

) DECLARATION RE NOTICE GIVEN ON
) EX PARTE APPLICATION TO GRANT (1)
) PETITION FOR GUARDIANSHIP OF THE
) PERSON, AND (2) PETITION FOR
) SPECIAL IMMIGRANT JUVENILE
) FINDINGS FOR MINOR

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14 I, Habiba Simjee, Esq., request on behalf of Petitioner, MINOR, ex parte orders granting: (1) her
15 Petition for Guardianship of the Person, MINOR; and (2) Petition for Special Immigrant Juvenile
16 (SIJ) Findings re: MINOR.

17
18 All petitions have already been filed with this Court, along with the Memorandum of Points and
19 Authorities as required by law. This request is being filed concurrently with the Declaration of
20 Urgency in support of this ex parte application.

1 I declare as follows regarding notice given of these ex parte requests for orders:

- 2 1. I am an attorney at law, duly admitted to practice before all state courts in the state of
3 California. I am a Staff Attorney at the University of California (“UC”) Immigrant Legal
4 Services Center and practice in the area of immigration law.
- 5 2. The UC Immigrant Legal Services Center represents MINOR (“Petitioner”) in these
6 proceedings that she has initiated to appoint her mother, GUARDIAN, as her guardian.
7 We also represent Petitioner in her petition for Special Immigrant Juvenile Findings.
- 8 3. As outlined in the concurrently filed Memorandum, the ex parte hearing is necessary
9 because Petitioner will suffer irreparable harm if she is not granted guardianship prior to
10 her 21st birthday, which is on Friday, [REDACTED] 2020. On that day, MINOR will lose her
11 only opportunity to apply for long-term protection from deportation to Mexico, where she
12 would suffer irreparable harm as a result of separation from her sole caregiver and her
13 entire support system here in the U.S., along with the loss of educational and career
14 opportunities; she will also be particularly vulnerable in an unfamiliar country with a
15 high crime rate.
- 16 4. Prior to filing the petition for guardianship of the person, Petitioner notified parties
17 requiring notice that she would be requesting that her mother, GUARDIAN, be appointed
18 her guardian. On August 17, 2020, Petitioner’s mother and Proposed Guardian,
19 GUARDIAN, signed Consent of Proposed Guardian on GC-211. Petitioner’s father, X,
20 also agreed to the guardianship and signed Consent to Appointment of Guardian and
21 Waiver of Notice on GC-211.
- 22 5. Petitioner’s maternal grandfather, Y, could not sign the GC-211 because he is disabled,
23 wheelchair-bound, lives alone in a remote area, and has limited access to internet and
24

1 mail; he also has difficulty communicating by phone. Petitioner's paternal grandmother,
2 paternal grandfather, and maternal grandmother of are all deceased and therefore could
3 not sign GC-211, and do not need to be notified of the instant case. Lastly, Petitioner's
4 younger siblings are under the age of 12, and are thus not required to receive notice.

5 6. In addition, I provided notice to all identifiable parties requiring notice of this ex parte
6 request by phone on September 24, 2020. With the assistance of our paralegal, Karina
7 Rocha, my office informed them that the Order Appointing Guardian and Special
8 Immigrant Juvenile Findings would be applied for by Petitioner ex parte, through
9 counsel, via e-filing to the Probate Court located at 111 North Hill Street, Los Angeles,
10 CA 90012, and that if they planned to oppose the motion, they should state so.

11 a. On September 24, 2020 between 3:52pm and 6:27pm, Ms. Rocha and I provided
12 notice by phone to the following parties, who stated that they do not oppose the
13 orders:

- 14 i. Petitioner and proposed ward, MINOR: [REDACTED];
- 15 ii. Proposed guardian and Petitioner's mother, GUARDIAN: [REDACTED];
- 16 iii. Petitioner's father, X (called by Ms. Rocha): [REDACTED]
- 17 iv. Petitioner's maternal grandfather, Y (called by Ms. Rocha): [REDACTED]
18 [REDACTED];

19 7. As mentioned above, Petitioner's paternal grandmother and grandfather, and maternal
20 grandmother are all deceased and cannot be provided with notice.

21
22 I declare under penalty of perjury under the laws of the State of California that the foregoing is
23 true and correct to the best of my recollection and knowledge.

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Dated this 24th of September, 2020

Habiba Simjee, Esq.
Pro Bono Attorney for Petitioner,
MINOR
UC Immigrant Legal Services Center

1 Habiba Simjee, Esq. (SBN 304537)
UC Immigrant Legal Services Center
2 c/o UCLA Bruin Resource Center
220 Westwood Plaza, Ste. B44
3 Los Angeles, CA 90095-1453
Tel: 424-443-9653

4 *Pro Bono* Attorney for Petitioner,
5 MINOR

6 SUPERIOR COURT OF THE STATE OF CALIFORNIA
7 COUNTY OF LOS ANGELES

8
9 In re Guardianship of
10 MINOR

) Case No.: [REDACTED]

) APPLICATION FOR EX PARTE ORDERS
) AND NOTICE GIVEN ON (1) PETITION
) FOR GUARDIANSHIP OF THE PERSON,
) AND (2) PETITION FOR SPECIAL
) IMMIGRANT JUVENILE FINDINGS FOR
) MINOR

11
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13
14 The Court finds that Petitioner’s application to advance hearings on her petition for
15 guardianship of the person and special immigrant juvenile findings is properly filed and has been
16 heard, and is therefore GRANTED.

17 DATE:

18 _____
Officer of the Superior Court

**APPENDIX L:
Sample Hearing
Transcript**



Mock Guardianship and SIJ Findings Hearing

Attorney: Sara Van Hofwegen

Petitioner/minor child: Jane Doe Smith

Respondent/mother: Maria Smith

Bailiff/Sherriff: All rise. Department 42 now in session. Honorable Judge Johnson presiding.

Judge Johnson: Good morning. Interpreter, can you state your appearance for the record?

Interpreter: Gloria Garcia, certified Spanish court interpreter, oath on file, badge number 123456.

Judge Johnson: [To judicial clerk] Can I have the parties sworn?

Judicial Clerk: [To the parties] Please raise your right hand. Do you swear to tell the truth, the whole truth and nothing but the truth so help you?

Parties through Interpreter: Yes.

Judge Johnson: [To attorney] Appearances please.

Attorney: Good morning your honor, Sara Van Hofwegen appearing pro bono on behalf of the petitioner.

Parties through Interpreter: Jane Doe Smith, Maria Smith.

Judge Johnson: Thank you. Counsel I reviewed the guardianship filing, request for Special Immigrant Juvenile Status, and probate attorney notes. Turning first to the guardianship hearing, with represent to JTD 1, I understand that you have not completed notice to Jane's father.

Attorney: Yes, your honor. We've exercised due diligence in our attempts to locate and serve Jane's father, but his whereabouts remain unknown. Under Probate Code section 1511(g) this court may waive notice if an individual cannot be located. We submitted a due diligence declaration regarding our attempt to locate Jane's father. Mr. Doe left Jane when she was very young and has not been in contact with her since then. We contacted several family members in Guatemala and in the United States and have been in contact with the Guatemalans consulate, but we have been unable to locate him.

Judge Johnson: Thank you, counsel, I will clear that note, along with JTD 2, because you submitted signed waivers of notice from Jane's mother and grandparents. Turning to JTD 3, you submitted Jane's declaration in support of the request for guardianship and SIJ Findings, but there is indication that you used a certified court interpreter to translation the declaration to her. Can I accept the declaration as evidence without a proper translation?

Attorney: Your honor, there is no requirement that a declaration be translated by a certified court interpreter. California Rule of Court 3.1110(g) says that exhibits must be translated by a “qualified” court interpreter, not a certified court interpreter. Rule 2.893, which requires certified court interpreters, is specific to in-court interpreters translating during hearings. In the this case, Jane’s declaration was reviewed with her in Spanish by Daniel Sanchez, a paralegal with Public Counsel, who attested under penalty of perjury that he is fluent in Spanish and in English and translated the declaration to Jane.

Judge Johnson: Thank you, counsel. I’d still like you to take brief testimony from the petitioners.

Attorney: Yes, your honor. Jane, how old are you?

Jane: Eighteen years old.

Attorney: Where were you born?

Jane: In Guatemala

Attorney: Who are your parents?

Jane: Pedro Doe and Julia Smith

Attorney: How do you know they are your parents?

Jane: They are on my birth certificate and I lived with them when I was young.

Attorney: Do you know where your father is today?

Jane: No

Attorney: When did you stop living with your father?

Jane: A long time ago.

Attorney: Do you know about how old you were?

Jane: I think 5 or 6.

Attorney: Have you spoken to your father since then?

Jane: No

Attorney: Do you know if he sent money to support you?

Jane: No, he didn’t.

Attorney: Do you know where your mother is today?

Jane: She died when I was 16.

Attorney: I'm sorry to hear that. Did she leave you any inheritance?

Jane: No.

Attorney: Did you attend school in Guatemala?

Jane: Yes until my mother died.

Attorney: What happened after your mother died?

Jane: I had to drop out of school to work.

Attorney: Are you in school now?

Jane: Yes

Attorney: What is the name of your school?

Jane: Ruth Bader Ginsberg High School. I am in the 11th grade.

Attorney: Who are you living with now?

Jane: With my aunt, Maria.

Attorney: Who do you want to live with?

Jane: My aunt, Maria.

Attorney: Why?

Jane: She takes care of me and gives me everything that I need. I can go to school and be safe with her.

Attorney: Do you understand that you are now 18 and legally able to make decisions for yourself?

Jane: Yes.

Attorney: Do you understand that, if the court appoints your aunt Maria to be your guardian, she will instead have the power to make decisions for you?

Jane: Yes.

Attorney: Do you want the court to appoint Maria as your legal guardian?

Jane: Yes.

Attorney: Why?

Jane: Because she takes care of me and I cannot survive without her. I don't speak English and she helps me go to the doctor and found a lawyer for my case. I can go to school and do not have to work.

Attorney: Thank you, Jane. Those are all my questions.

Judge Johnson: I am prepared to clear the JTD as to appointment and appoint Maria as Jane's legal guardian. I am also prepared to make the Special Immigrant Juvenile Findings as to Jane's father, but I am not sure if I can make them regarding Jane's mother. She did not abandon Jane by choice; she passed away.

Attorney: Your honor, under California law, intent to abandon is not required for abandonment. Instead both Family Code section 3402(a) and Welfare & Institutions Code section 300(g) look at the situation of the child and find that the child has been left without provision or support. There is also case law supporting that intent is not required for abandonment, including *In re Jorge G.* (2008) 164 Cal.App.4th 125, 132-33 and *D.M. v. Superior Ct.* (2009) 173 Cal.App.4th 1117, 1128-29. In this case, the death of Jane's mother left her without provision or support and Jane has been abandoned under California law.

Judge Johnson: Thank you, counsel. I will make the orders regarding Jane's mother as well. I am going to clear the rest of the JTD notes and sign the orders submitted by counsel. Good luck, Jane!

**APPENDIX M:
Sample Form Used to Terminate
Representation**



ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): — Ylianna Perez Guerrero 195498 PUBLIC COUNSEL 610 S. ARDMORE AVE. LOS ANGELES, CA 90005 TELEPHONE NO.: 213-385-2977 FAX NO. (Optional): 213-385-9089 E-MAIL ADDRESS (Optional): yguerrero@publiccounsel.org ATTORNEY FOR (Name): Olivia Doe	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES STREET ADDRESS: 111 N. HILL STREET MAILING ADDRESS: 111 N. HILL STREET CITY AND ZIP CODE: LOS ANGELES, CA 90012 BRANCH NAME: CENTRAL	
CASE NAME: Guardianship for Emily Doe	
SUBSTITUTION OF ATTORNEY - CIVIL (Without Court Order)	CASE NUMBER: 16STPB00000

THE COURT AND ALL PARTIES ARE NOTIFIED THAT (name): _____ makes the following substitution:

- Former legal representative** Party represented self Attorney (name): Ylianna Perez-Guerrero
- New legal representative** Party is representing self* Attorney
 - Name: _____
 - State Bar No. (if applicable): _____
 - Address (number, street, city, ZIP, and law firm name, if applicable): _____

- d. Telephone No. (include area code): _____
3. The party making this substitution is a plaintiff defendant petitioner respondent other (specify): _____

***NOTICE TO PARTIES APPLYING TO REPRESENT THEMSELVES**

- Guardian**
- Personal Representative**
- Guardian ad litem**
- Conservator**
- Probate fiduciary**
- Unincorporated association**
- Trustee**
- Corporation**

If you are applying as one of the parties on this list, you may NOT act as your own attorney in most cases. Use this form to substitute one attorney for another attorney. SEEK LEGAL ADVICE BEFORE APPLYING TO REPRESENT YOURSELF.

NOTICE TO PARTIES WITHOUT ATTORNEYS
 A party representing himself or herself may wish to seek legal assistance. Failure to take timely and appropriate action in this case may result in serious legal consequences.

4. I consent to this substitution.

Date:

Olivia Doe _____
 (TYPE OR PRINT NAME)

▶ _____
 (SIGNATURE OF PARTY)

5. I consent to this substitution.

Date:

Ylianna Perez-Guerrero _____
 (TYPE OR PRINT NAME)

▶ _____
 (SIGNATURE OF FORMER ATTORNEY)

6. I consent to this substitution.

Date:

 (TYPE OR PRINT NAME)

▶ _____
 (SIGNATURE OF NEW ATTORNEY)

(See reverse for proof of service by mail)

CASE NAME: Guardianship for Emily Doe	CASE NUMBER: 16STPB00000
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**PROOF OF SERVICE BY MAIL
Substitution of Attorney - Civil**

Instructions: After having all parties served by mail with the Substitution of Attorney-Civil, have the person who mailed the document complete this Proof of Service by Mail. An unsigned copy of the Proof of Service by Mail should be completed and served with the document. Give the Substitution of Attorney-Civil and the completed Proof of Service by Mail to the clerk for filing. If you are representing yourself, someone else must mail these papers and sign the Proof of Service by Mail.

1. I am over the age of 18 and **not a party to this cause**. I am a resident of or employed in the county where the mailing occurred. My residence or business address is (*specify*): 610 South Ardmore Avenue
Los Angeles, CA 90005

2. I served the Substitution of Attorney-Civil by enclosing a true copy in a sealed envelope addressed to each person whose name and address is shown below and depositing the envelope in the United States mail with the postage fully prepaid.

(1) Date of mailing: 11/12/2020

(2) Place of mailing (*city and state*): Los Angeles, CA

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

Date:

Ylianna Perez-Guerrero

(TYPE OR PRINT NAME)

(SIGNATURE)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

4. a. Name of person served: Emily Doe

b. Address (*number, street, city, and ZIP*): 11 Gate Street
Los Angeles, CA 90001

c. Name of person served: Papa Doe

d. Address (*number, street, city, and ZIP*): 11 Gate Street
Los Angeles, CA 90001

e. Name of person served:

f. Address (*number, street, city, and ZIP*):

g. Name of person served:

h. Address (*number, street, city, and ZIP*):

i. Name of person served:

j. Address (*number, street, city, and ZIP*):

List of names and addresses continued in attachment.