THIS FORM MUST BE KEPT CONFIDENTIAL

		DE REI I GOIN IDENTIA	
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar num	ber, and address):	TELEPHONE AND FAX NOS:	FOR COURT USE ONLY
ATTORNEY FOR (Name):			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: 725 COURT STREET	CONTRA COSTA	A	
STREET ADDRESS: 725 COURT STREET MAILING ADDRESS: P.O. BOX 911			
CITY AND ZIP: MARTINEZ, CA 94553			_
Guardianship Conservatorship of (Nat	me):		
☐ Proposed ☐ Minor	r L Con	servatee	
APPLICATION <u>AND OR</u> OF COURT INVESTIGA			CASE NUMBER:
PETITIONER (Name):			
requests a court order deferring payment of a (specify):	ssessment req	uired by Probate Code 1513.1	or 1851.5. My address and date of birth ar
Address:			Birthdate:
2. Check applicable box:			
☐ The Ward ☐ The Proposed Ward	☐ The	e Conservatee	Proposed Conservatee
is receiving financial assistance under one or		· · ·	
a. U SSI/SSP: The Supplemental Se	-	• • • • • • • • • • • • • • • • • • • •	ents Programs
b. AFDC: The Aid to Families with	•	ildren Program	
c. Food Stamps: The Food Stamp	-		
d. U County Relief, General Relief (- \
(If you completed Item 2, sign your name at I 3. Payment of the assessment would create			n.) ecked this box you must complete Item 5
and DO NOT complete Item 4.	s a personal na	iluship loi petitioner. Il you ch	ecked this box you must complete item 5
	nt of the asses	sment would create a hardship	o for the estate. If you checked this box you
must complete Item 6.			
 My pay changes considerably from mont average for the past 12 months.) 	h to month. (If	you check this box, each of th	e amounts reported in Item 5 should be you
a. Gross monthly pay	\$		
b. Total payroll deduction amount	\$		
c. Monthly take-home pay (a. minus b.)		 \$	
d. Other income I get each month (Specify			
1.			
2. Total other income (d1. plus d2.)	\$	\$	
e. Total monthly income (c. plus d.)		Ψ	 \$
f. The number of people in my family, inclu	ding me, suppo	orted by this money is:	
g. Total monthly expenses			\$
h. I own the following:	_		
Cash		<u></u>	
Checking, savings and credit union acco	•		
2.			
3.			
Cars, other vehicles, boats (list make, mo			
1			
2.			
Real estate equity		honds etc	
Other personal property—jewelry, furnitu (list separately)		, bonds, etc.	
Total assets (total of all items listed under h.			\$

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i.		e (describe unusual medical needs, expenses for recent family emergencies, or derstand your budget). If more space is needed, attach page labeled "Attachmen
. Es a.	timated value of the property of the estate: Personal Property	\$
b.	Annual gross income from	Ψ
~.	Real property	\$
	2. Personal property	\$ \$
	nderstand that this fee is subject to reconsideratestigation fee.	ation after the investigation and I may be required to pay all or a portion of the
Ιd	eclare under penalty of perjury under the laws of	of the State of California that the foregoing is true and correct.
sto di		
ileu.		(Signature)
		(Type or print name)
		ORDER
t is o	rdered that the above Application for Deferr	
	Granted subject to reconsideration after the investig	☐ Denied gation
)ated	:	
2.00	·	Judge of the Superior Court

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