

PERSON FILING PAPERS <i>(Name and address, include Karuk Tribal Bar # if applicable):</i> TELEPHONE NO.: _____ FAX NO. <i>(Optional)</i> : _____ E-MAIL ADDRESS <i>(Optional)</i> : _____ ATTORNEY FOR <i>(Name)</i> : _____	FOR COURT USE ONLY
KARUK TRIBAL COURT STREET ADDRESS: MAILING ADDRESS: P.O. Box 629 CITY AND ZIP CODE: Yreka, CA 96097 TELEPHONE NO.: (530) 842-9228 FAX NO.: (530) 842-9227	
<input type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF <i>(Name)</i> : _____ <div style="text-align: right;"><input 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)*:
(representative capacity, if any):
 has filed *(specify)*: _____

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.

 Powers requested are specified below specified in Attachment 3.

4. A HEARING on the matter will be held as follows:

a. Date:	Time:	Dept.:	Room:
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

b. Address of court same as noted above is *(specify)*: _____

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services may be available upon request if at least 5 days notice is provided. Contact the clerk's office for accommodation.

