

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):  
 After recording return to:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 TELEPHONE NO.:  
 FAX NO. (Optional):  
 E-MAIL ADDRESS (Optional):  
 ATTORNEY FOR (Name):

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF**  
 STREET ADDRESS:  
 MAILING ADDRESS:  
 CITY AND ZIP CODE:  
 BRANCH NAME:

FOR RECORDER'S USE ONLY

CONSERVATORSHIP OF \_\_\_\_\_  
 (Name): \_\_\_\_\_ CONSERVATEE

CASE NUMBER: \_\_\_\_\_

**LETTERS OF CONSERVATORSHIP**

Person  Estate  Limited Conservatorship

FOR COURT USE ONLY

1.  (Name): \_\_\_\_\_ is the appointed  
 conservator  limited conservator of the  person  estate  
of (name): \_\_\_\_\_
2.  (For conservatorship that was on December 31, 1980, a guardianship of an adult  
or of the person of a married minor) (Name):  
was appointed the guardian of the  person  estate by order dated  
(specify): \_\_\_\_\_ and is now the conservator of the   
person  estate of (name): \_\_\_\_\_
3.  Other powers have been granted or conditions imposed as follows:
  - a.  Exclusive authority to give consent for and to require the conservatee to receive medical treatment that the conservator  
in good faith based on medical advice determines to be necessary even if the conservatee objects, subject to the  
limitations stated in Probate Code section 2356.
    - (1)  This treatment shall be performed by an accredited practitioner of the religion whose tenets and practices  
call for reliance on prayer alone for healing of which the conservatee was an adherent prior to the  
establishment of the conservatorship.
    - (2)  (If court order limits duration) This medical authority terminates on (date): \_\_\_\_\_
  - b.  Authority to place the conservatee in a care or nursing facility described in Probate Code section 2356.5(b).
  - c.  Authority to authorize the administration of medications appropriate for the care and treatment of dementia described in  
Probate Code section 2356.5(c).
  - d.  Powers to be exercised independently under Probate Code section 2590 are specified in Attachment 3d (specify powers,  
restrictions, conditions, and limitations).
  - e.  Conditions relating to the care and custody of property under Probate Code section 2402 are specified in Attachment 3e.
  - f.  Conditions relating to the care, treatment, education, and welfare of the conservatee under Probate Code section 2358  
are specified in Attachment 3f.
  - g.  (For limited conservatorship only) Powers of the limited conservator of the person under Probate Code section 2351.5  
are specified in Attachment 3g.
  - h.  (For limited conservatorship only) Powers of the limited conservator of the estate under Probate Code section 1830(b)  
are specified in Attachment 3h.
  - i.  Other powers granted or conditions imposed are specified in Attachment 3i.

(SEAL)

4.  The conservator is **not** authorized to take possession of money or any other property without a  
specific court order.

5. Number of pages attached: \_\_\_\_\_

WITNESS, clerk of the court, with seal of the court affixed.

Date:

Clerk, by \_\_\_\_\_, Deputy

CONSERVATORSHIP OF (Name):   CONSERVATEE	CASE NUMBER:
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**NOTICE TO INSTITUTIONS AND FINANCIAL INSTITUTIONS**  
**(Probate Code sections 2890–2893)**

When these *Letters of Conservatorship* (Letters) are delivered to you as an employee or other representative of an *institution* or *financial institution* (described below) in order for the conservator of the estate (1) to take possession or control of an asset of the 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 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 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.courtinfo.ca.gov/forms/](http://www.courtinfo.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 (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, agent, or broker; an investment company; an investment bank; a securities broker-dealer; an investment advisor; a financial planner; a financial advisor; or any other person who takes, holds, or controls an asset subject to a 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 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, a trust, a savings and loan association, a savings bank, an industrial bank, or a 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 CONSERVATORSHIP**

**AFFIRMATION**

I solemnly affirm that I will perform according to law the duties of  conservator  limited conservator.

Executed on (date): \_\_\_\_\_, at (place): \_\_\_\_\_



\_\_\_\_\_  
(TYPE OR PRINT NAME)

\_\_\_\_\_  
(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)
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Date: \_\_\_\_\_

Clerk, by \_\_\_\_\_, Deputy