ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number and Address):		FOR COURT USE ONLY	
TELEPHONE NO: FAX N	O. (Optional):		
E-MAIL ADDRESS (<i>Optional</i>):	e. (opnomi).		
ATTORNEY FOR (Name):			
SUPERIOR COURT OF CALIFORNIA, COUNTY	OF SAN JOAQUIN		
STREET ADDRESS: 180 E WEBER AVENUE			
MAILING ADDRESS: 180 E WEBER AVENUE			
CITY AND ZIP CODE: STOCKTON, CA 95202			
BRANCH OF NAME: STOCKTON			
CONSERVATORSHIP OF THE PERSON ESTATE OF		CASE NUMBER:	
(Name): Conservatee			
ORDER TERMINATING CONSERVATORSHIP		HEARING DATE:	
ORDER TERMINATING CONSI	LKVAIOKSHIP	DEPT:	TIME:
		1	
1. The Petition to Terminate Conservatorship came on for hearing as follows:			
a. Judicial Officer:		_	
b. Hearing date:	Time:	Dept:	
c. \Box Petitioner:			
d. \Box Attorney for Petitioner:			
e. 🗆 Conservatee:			
f. \Box Attorney for Conservatee:			
g. \Box Conservator of the person:			
h. \Box Attorney for conservator of the person:			
i. \Box Conservator of the estate:			
j. \Box Attorney for conservator of the estate:			
THE COUDT EINDS			
THE COURT FINDS			
2. a. \Box All notices required by law have been given.			
b. \Box Notice of hearing \Box has been \Box should be dispensed with to the following persons (<i>specify</i>):			
c. \Box The conservatorship of the PERSON is no lor	ager required		
d. The conservatorship of the ESTATE is no longer required.			
(1) \Box The estate has been entirely exhausted through expenditures or disbursements (Prob. Code § 2626).			
(2) \Box The Conservator of the Estate shall file within days after the entry of this order a final accounting.			
(3) \Box Other (specify):			
THE COURT ORDERS			
3. □ The conservatorship of the PERSON of (conserv		is terminated.	
4. □ The conservatorship of the ESTATE of (conserv		is terminated.	
 5.			is terminated.
6. \Box Other (specify): \Box Continued on Attachment 7.			
Date:			
Judge of the Superior Court			
\square Signature follows last attachment.			