

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar Number and Address</i>): TELEPHONE NO: _____ FAX NO. (<i>Optional</i>): _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____			
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			
In the <input type="checkbox"/> Estate <input type="checkbox"/> Trust <input type="checkbox"/> Conservatorship <input type="checkbox"/> Guardianship <input type="checkbox"/> Other of (Name): _____ <div style="text-align: right;"><input type="checkbox"/> Decedent <input type="checkbox"/> Conservatee <input type="checkbox"/> Minor <input type="checkbox"/> Other</div>	CASE NUMBER: _____		
<input type="checkbox"/> EX PARTE <input type="checkbox"/> PETITION TO INCREASE BOND AND/OR <input type="checkbox"/> PETITION TO PLACE FUNDS IN BLOCKED ACCOUNT(S) <input type="checkbox"/> PETITION TO DECREASE BOND	HEARING DATE: _____ <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;">DEPT: _____</td> <td style="width:50%; border: none;">TIME: _____</td> </tr> </table>	DEPT: _____	TIME: _____
DEPT: _____	TIME: _____		

NOTE: A Petition to Decrease Bond CANNOT be submitted *ex parte* and must be submitted on noticed hearing.

1. Petitioner(s) name(s): _____

2. Petitioner(s) role in case: Personal Representative Trustee Conservator Guardian
 Other: _____

3. Bond calculation:

a. Current amount of bond:		\$ _____
b. Appraised value of real property subject to disposition without prior court approval	\$ _____	
c. Any outstanding mortgage can be subtracted from the total. If a mortgage amount is being subtracted provide that amount here	\$ (_____)	
d. Appraised value of personal property	\$ _____	
e. Estimated annual income from real and personal property	\$ _____	
f. Amount of conservatorship/guardianship recovery bond required, if applicable	\$ _____	
g. Total amount of required bond (b-c+d+e+f):		\$ _____
h. Amount of deficiency (g-a):	\$ _____	
i. Amount of excess (a-g):	\$ _____	

4. Bond should be increased by: \$ _____ for a total bond of \$ _____

IN RE (Name):	CASE NUMBER:
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5. The amount of \$ _____ should be placed in one or more blocked accounts as follows:

Amount (\$)	Name of Institution	Address of Institution

6. Bond should be decreased by: \$ _____ for a total bond of \$ _____

7. Additional Information and/or request(s) (optional):

VERIFICATION

I declare that:

I am the personal representative trustee conservator guardian other: _____ of the above-entitled estate. I have read the foregoing EX PARTE PETITION TO INCREASE BOND AND/OR PLACE FUNDS IN BLOCKED ACCOUNT(S) or PETITION TO DECREASE BOND and know the contents thereof; the same is true of my own knowledge, except as to those matters which are therein stated upon my information or belief, and as to those matters I believe them 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: _____

(Petitioner's Signature)