

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME, STATE BAR NUMBER AND ADDRESS)		FOR COURT USE ONLY
TELEPHONE NUMBER:	FAX NO. (Optional):	
EMAIL ADDRESS (Optional):		
ATTORNEY FOR (Name):		
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN LUIS OBISPO</b>  STREET ADDRESS: 1035 Palm Street, Room 385 MAILING ADDRESS: Same as above CITY AND ZIP CODE: San Luis Obispo, CA 93408 BRANCH NAME: San Luis Obispo Division		
LPS CONSERVATORSHIP OF:	CASE NUMBER:	
<b>NOTICE OF HEARING ON PETITION FOR REAPPOINTMENT OF LPS CONSERVATOR</b>		

**NOTICE IS HEREBY GIVEN** that a **Petition for Reappointment of LPS Conservator** has been filed in this court.

Any interested person may appear and show cause, if any, why a conservator should not be reappointed for the proposed conservatee referred above. The hearing will be held before the Judge of this Court in the **County of San Luis Obispo, State of California, located at 1035 Palm Street, San Luis Obispo as follows:**

**Date:** \_\_\_\_\_.  
**Time:** \_\_\_\_\_ **a.m.**  
**Department:** \_\_\_\_\_.

REFERENCE is made to the Petition on file in this matter for further particulars.

Date: \_\_\_\_\_

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature of Proposed Conservator)