

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address) TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SONOMA	
In re: _____	
PROBATE CASE COVER SHEET	Case number: _____

1. Estimated total value of decedent's estate: \$ _____

2. Check **only one** box for the case type that best describes this case:

- | | |
|--|---|
| <input type="checkbox"/> Decedent's Estate (12a/10) <ul style="list-style-type: none"> <input type="checkbox"/> Probate of Will <input type="checkbox"/> Probate of Will with Will Annexed <input type="checkbox"/> Letters of Administration <input type="checkbox"/> Letters of Special Administration <input type="checkbox"/> Trust (12a/20) <ul style="list-style-type: none"> <input type="checkbox"/> Notice to Creditors <input type="checkbox"/> Petition Concerning Internal Affairs of Trust <input type="checkbox"/> Determine Existence of Trust <input type="checkbox"/> Confirm Assets in Trust <input type="checkbox"/> Determine Questions of Construction <input type="checkbox"/> Determine Validity of a Trust Provision <input type="checkbox"/> Determine Beneficiaries upon Termination <input type="checkbox"/> Granting Powers to the Trustee <input type="checkbox"/> Amending or Conforming the Trust Instrument <input type="checkbox"/> Transfer Testamentary Trust to Another County <input type="checkbox"/> Removal of Testamentary Trust from Continuing Court Jurisdiction <input type="checkbox"/> Appointment of Trustee <input type="checkbox"/> Removal of Trustee <input type="checkbox"/> Petition for Instructions <input type="checkbox"/> Modification or Termination of the Trust <input type="checkbox"/> Compel Trustee to Account or Report <input type="checkbox"/> Approval of Accounting of Trustee <input type="checkbox"/> Petition Contesting Accounting of Trustee <input type="checkbox"/> Compel Redress for Breach of Trust <input type="checkbox"/> Determine Liability of the Trust for Debts <input type="checkbox"/> Determine Reasonableness of Compensation <input type="checkbox"/> Approval of Special Needs Trust <input type="checkbox"/> Other Trust Petition <input type="checkbox"/> Conservatorship (12a/30) <ul style="list-style-type: none"> <input type="checkbox"/> Appointment of Conservator - Person <input type="checkbox"/> Appointment of Conservator - Estate <input type="checkbox"/> Appointment of Conservator - Person and Estate | <input type="checkbox"/> Appointment of Limited Conservator - Person
<input type="checkbox"/> Appointment of Limited Conservator - Estate
<input type="checkbox"/> Appointment of Limited Conservator - Person and Estate

<input type="checkbox"/> Guardianship (12a/40) <ul style="list-style-type: none"> <input type="checkbox"/> Appointment of Guardian - Person <input type="checkbox"/> Appointment of Guardian - Estate <input type="checkbox"/> Appointment of Guardian - Person and Estate <input type="checkbox"/> Other Petition (05b/110) <ul style="list-style-type: none"> <input type="checkbox"/> Name Change <input type="checkbox"/> Change of Name and Gender <input type="checkbox"/> Other Probate with One Hearing (12a/50) <ul style="list-style-type: none"> <input type="checkbox"/> Spousal Property Petition <input type="checkbox"/> Establish Fact of Birth, Death, or Marriage <input type="checkbox"/> Determine Succession to Real Property <input type="checkbox"/> Authority for Medical Treatment of Adult Without Conservator <input type="checkbox"/> Approval of Compromise of Claim Regarding Management of Property Where Spouse Lacks Legal Capacity (PrC §3100) <input type="checkbox"/> Appointment of Successor Custodian (PrC § 3918) <input type="checkbox"/> Other Probate Petition <input type="checkbox"/> Other Probate with No Hearing (12a/60) <ul style="list-style-type: none"> <input type="checkbox"/> Affidavit re Real Property of Small Value <input type="checkbox"/> Application & Order of Public Administrator Pursuant to Prob §7660 <input type="checkbox"/> Disclaimer of Interest |
|--|---|

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF PARTY OR ATTORNEY FOR PARTY)