

TERMINATE GUARDIANSHIP

FORMS ARE AVAILABLE ON THE INTERNET AT WWW.SUTTERCOURTS.COM OR WWW.COURTS.CA.GOV

To Terminate a Guardianship the following forms are required:

1. **GC-255:** Petition for Termination of Guardianship
2. **MC-025:** Attachment
3. **GC-020:** Notice of Hearing
4. Order Appointing Court Investigator – Local Form
5. **GC-260:** Order Terminating Guardianship

Complete the forms and make one full set of copies of everything listed above. You will also need to complete a Guardianship Investigation Questionnaire (Local Forms/Package). No copies are needed of the Questionnaire Packet.

File everything at the Civil division.

Make a copy of all Endorsed Filed documents and serve a copy on each person who was served with the original Petition for Guardianship.

If you cannot locate a party, do a “Declaration of Due Diligence” Search (Local Form) and include a request for the court to dispense with notice to the party you cannot locate (Form GC-021). Once you have had all of the parties served, file your Proof of Service (FL-335) with the court BEFORE your court date.

REVISED 7/1/2013

**SUPERIOR COURT OF CALIFORNIA
COUNTY OF SUTTER**

**FAMILY LAW FACILITATOR
FAMILY LAW INFORMATION CENTER**


530-822-3305

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): YOUR NAME HERE YOUR STREET ADDRESS HERE YOUR CITY, STATE, and ZIP CODE HERE TELEPHONE NO.: TELEPHONE # FAX NO. (Optional): E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): WRITE "IN PRO PER"		FOR COURT USE ONLY	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF COUNTY NAME STREET ADDRESS: COURT'S PHYSICAL ADDRESS MAILING ADDRESS: CITY AND ZIP CODE: COURT'S CITY, STATE, and ZIP CODE BRANCH NAME:			
GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF (Name): CHILD'S NAME HERE CHECK THIS BOX MINOR		CASE NUMBER: CASE NUMBER HERE	
PETITION FOR TERMINATION OF GUARDIANSHIP		HEARING DATE AND TIME:	DEPT.:

- Petitioner (name): YOUR NAME HERE requests that
 - the guardianship of the PERSON of (minor): CHILD'S NAME HERE be terminated.
 - the guardianship of the ESTATE of (minor): be terminated.
 - The estate has been entirely exhausted through expenditures or disbursements (Probate Code, § 2626).
 - The estate falls within the provisions of Probate Code section 2628(b) (small estate), and no accounts have been required.
 - Other (specify): CHECK BOX THAT APPLIES
- Petitioner is the minor minor's guardian minor's parent.
- (Name): GUARDIANS NAME HERE was appointed guardian of the PERSON
 of the minor named in item 1a on (date): DATE GUARDIANSHIP WAS GRANTED
- (Name): was appointed guardian of the ESTATE
 of the minor named in item 1b on (date):
- It is in the best interest of the minor that the guardianship of the person estate be terminated for the reasons
 stated in Attachment 5 stated below (specify): CHECK THIS BOX
- A request for special notice
 - has not been filed.
 - has been filed and notice will be given to (names): CHECK ANY BOXES THAT APPLY
- Notice to the persons identified in Attachment 7 should be dispensed with because
 - they cannot with reasonable diligence be given notice (specify names and efforts to locate in Attachment 7).
 - other good cause exists to dispense with notice (specify names and reasons in Attachment 7).
- Petitioner is the minor's guardian. Petitioner requests reasonable visitation with the minor after termination of the guardianship as specified in Attachment 8. A completed Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA) (form FL-105/GC-120) is also attached.

NOTICE: This guardianship will terminate automatically when the child reaches age 18. No petition or court order is necessary to terminate the guardianship at that time. Nevertheless, if this is a guardianship of the estate, termination of the guardianship does not eliminate the requirement that a final report or account must be filed. (See Prob. Code, § 1600.)

GUARDIANSHIP OF THE PERSON ESTATE OF _____ (Name): _____ MINOR

CASE NUMBER: _____

MINORS NAME HERE **CHECK THIS BOX** **CASE NUMBER**

9. The names and residence addresses of the guardian, minor, and minor's parents, brothers, sisters, and grandparents are (specify):

- a. Guardian:
- b. Minor:
- c. Father:
- d. Mother:
- e. Brother or sister:
- f. Brother or sister:
- g. Brother or sister:
- h. Maternal grandfather:
- i. Maternal grandmother:
- j. Paternal grandfather:
- k. Paternal grandmother:

ENTER ALL INFORMATION ABOUT THESE RELATIVES; THEY ARE THE LIST OF PEOPLE ENTITLED TO NOTICE OF THIS PETITION.

l. Additional names and addresses continued on Attachment 9.

10. Number of pages attached: _____

Date: _____ **DATE HERE** **SIGN NAME HERE**

(SIGNATURE OF ATTORNEY OR PETITIONER WITHOUT AN ATTORNEY *)

* (Signature of all petitioners also required (Prob. Code, § 1020).)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: **DATE HERE** **PRINT NAME HERE** **SIGN NAME HERE**

(TYPE OR PRINT NAME) (SIGNATURE OF PETITIONER)

PRINT NAME HERE IF TWO PETITIONERS **SIGN NAME HERE IF TWO PETITIONERS**

(TYPE OR PRINT NAME) (SIGNATURE OF PETITIONER)

CONSENT TO TERMINATION AND WAIVER OF SERVICE AND NOTICE OF HEARING

11. I consent to the termination of the guardianship of the person estate of the minor and waive service of a copy of, and notice of the hearing on, this petition.

Date: _____ (TYPE OR PRINT NAME) (SIGNATURE OF MINOR * GUARDIAN PARENT OTHER)

Date: _____ (TYPE OR PRINT NAME) (SIGNATURE OF MINOR * GUARDIAN PARENT OTHER)

Date: _____ (TYPE OR PRINT NAME) (SIGNATURE OF MINOR * GUARDIAN PARENT OTHER)

Date: _____ (TYPE OR PRINT NAME) (SIGNATURE OF MINOR * GUARDIAN PARENT OTHER)

Additional signatures on Attachment 11.

* Minor over 12 years of age.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): YOUR NAME HERE YOUR STREET ADDRESS HERE YOUR CITY, STATE, and ZIP CODE HERE		FOR COURT USE ONLY	
TELEPHONE NO.:	PROB. NO. (Optional):		
E-MAIL ADDRESS (Optional):			
ATTORNEY FOR (Name):			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF			
STREET ADDRESS:		COURT'S STREET ADDRESS HERE CITY AND ZIP CODE HERE	
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
GUARDIANSHIP OF THE <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF			
(Name): MINORS NAME HERE		CHECK THIS BOX	
		MINOR	
ORDER TERMINATING GUARDIANSHIP		CASE NUMBER: CASE NUMBER	

1. The petition to terminate the guardianship came on for hearing as follows (check boxes c-l to indicate personal presence):

- a. Judicial Officer (name):
- b. Hearing date: **Hearing Date** Time: **Time** Dept. **Dept.** Rm.:
- c. Petitioner (name):
- d. Attorney for petitioner (name):
- e. Minor (name):
- f. Attorney for minor (name):
- g. Guardian of the person (name):
- h. Attorney for guardian of the person (name):
- i. Guardian of the estate (name):
- j. Attorney for guardian of the estate (name):
- k. Parent of minor (name):
- l. Attorney for parent (name):

CHECK THE BOX FOR ALL PARTIES WHO APPEARED

THE COURT FINDS

CHECK ANY FINDINGS THAT THE COURT MADE THAT WAS INCLUDED IN COURT MINUTES

- 2. a. All notices required by law have been given.
- b. Notice of hearing has been should be dispensed with to the following persons (specify):
- c. It is in the minor's best interest to terminate the guardianship of the PERSON.
- d. It is in the minor's best interest to terminate the guardianship of the ESTATE.
 - (1) The estate has been entirely exhausted through expenditures or disbursements (Prob. Code, § 2626).
 - (2) The estate falls within the provisions of Probate Code section 2628(b) (small estate), and no accounts have been required.
 - (3) Other reasons (specify):

THE COURT ORDERS

CHECK THE BOXES FOR THE ORDERS THAT THE COURT MADE AND ARE IN THE COURT MINUTES

- 3. The guardianship of the PERSON of (minor): is terminated.
- 4. The guardianship of the ESTATE of (minor): is terminated.
- 5. Notice of hearing to the persons named in item 2b is dispensed with.
- 6. Visitation between the minor and the guardian of the person of the estate is ordered as provided in Attachment 6.
- 7. Other (specify):

Continued on Attachment 7.

Date:

JUDICIAL OFFICER
 Signature follows last attachment.

SHORT TITLE:	WRITE "GUARDIANSHIP OF CHILD'S NAME" HERE	CASE NUMBER: CASE NUMBER HERE
--------------	---	----------------------------------

ATTACHMENT (Number):

WRITE "5" HERE

(This Attachment may be used with any Judicial Council form.)

TELL THE COURT WHY IT IS NOW IN THE
 BEST INTEREST OF THE MINOR THAT THE
 GUARDIANSHIP BE TERMINATED.

(If the item that this Attachment concerns is made under penalty of perjury, all statements in this Attachment are made under penalty of perjury.)

Page _____ of _____
(Add pages as required)

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):</p> <div style="border: 1px solid red; padding: 5px; text-align: center; color: red;"> YOUR NAME HERE YOUR STREET ADDRESS HERE YOUR CITY, STATE, and ZIP CODE HERE </div> <p>TELEPHONE NO.: _____ FAX NO. (Optional): _____</p> <p>E-MAIL ADDRESS (Optional): _____</p> <p>ATTORNEY FOR (Name): _____</p>	<p>FOR COURT USE ONLY</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</p> <p>STREET ADDRESS: <div style="border: 1px solid red; padding: 5px; text-align: center; color: red;">COURT'S STREET ADDRESS HERE ZIP CODE HERE</div></p> <p>MAILING ADDRESS: _____</p> <p>CITY AND ZIP CODE: _____</p> <p>BRANCH NAME: _____</p>	
<p><input checked="" type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> CONSERVATORSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE</p> <p>OF (Name): <div style="border: 1px solid red; padding: 5px; text-align: center; color: red;">MINORS NAME HERE</div></p> <p><input checked="" type="checkbox"/> MINOR <input type="checkbox"/> (PROPOSED) CONSERVATOR</p> <div style="border: 1px solid red; padding: 5px; text-align: center; color: red; margin-top: 10px;"> CHECK THESE BOXES </div>	
<p>NOTICE OF HEARING—GUARDIANSHIP OR CONSERVATORSHIP</p>	<p>CASE NUMBER: <div style="border: 1px solid red; padding: 5px; text-align: center; color: red;">CASE NUMBER HERE</div></p>

**This notice is required by law.
This notice does not require you to appear in court, but you may attend the hearing if you wish.**

1. NOTICE is given that (name):

YOUR NAME HERE

(representative capacity, if any).
has filed (specify):

PETITION FOR TERMINATION OF GUARDIANSHIP

2. You may refer to documents on file in this proceeding for more information. (Some documents filed with the court are confidential. Under some circumstances you or your attorney may be able to see or receive copies of confidential documents if you file papers in the proceeding or apply to the court.)

3. The petition includes an application for the independent exercise of powers by a guardian or conservator under Probate Code section 2108 Probate Code section 2590.
Powers requested are specified below specified in Attachment 3.

4. A HEARING on the matter will be held as follows:

a. Date:	Time:	Dept.:	Room:
----------	-------	--------	-------

b. Address of court same as noted above is (specify):

CHECK THIS BOX

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available upon request if at least 5 days notice is provided. Contact the clerk's office for *Request for Accommodations by Persons with Disabilities and Order* (form MC-410). (Civil Code section 54.8.)



GUARDIANSHIP CONSERVATORSHIP OF THE PERSON ESTATE CASE NUMBER:
 OF (Name): MINORS NAME HERE CHECK THIS BOX CASE NUMBER

NOTE: *

A copy of this *Notice of Hearing—Guardianship or Conservatorship* ("Notice") must be "served" on—delivered to—each person who has the right under the law to be notified of the date, time, place, and purpose of a court hearing in a guardianship or conservatorship. Copies of this Notice may be served by mail in most situations. In a guardianship, however, copies of this Notice must sometimes be personally served on certain persons; and copies of this Notice may be personally served instead of served by mail in both guardianships and conservatorships. The petitioner (the person who requested the court hearing) **may not personally perform either service by mail or personal service**, but must show the court that copies of this Notice have been served in a way the law allows. The petitioner does this by arranging for someone else to perform the service and complete and sign a proof of service, which the petitioner then files with the original Notice.

This page contains a proof of service that may be used only to show service by mail. To show personal service, each person who performs the service must complete and sign a proof of personal service, and each signed copy of that proof of service must be attached to this Notice when it is filed with the court.. You may use form GC-020(P) to show personal service of this Notice.

* (This Note replaces the clerk's certificate of posting on prior versions of this form. If notice by posting is desired, attach a copy of form GC-020(C), Clerk's Certificate of Posting Notice of Hearing—Guardianship or Conservatorship. (See Prob. Code, § 2543(c).)

PROOF OF SERVICE BY MAIL

1. I am over the age of 18 and not a party to this cause. I am a resident of or employed in the county where the mailing occurred.
2. My residence or business address is (specify): ADDRESS OF THE PERSON WHO SERVED FOR YOU
3. I served the foregoing *Notice of Hearing—Guardianship or Conservatorship* on each person named below by enclosing a copy in an envelope addressed as shown below AND
 - a. depositing the sealed envelope with the United States Postal Service on the date and at the place shown in item 4 with the CHECK A BOX
 - b. placing CHECK A BOX and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.
4. a. Date mailed: DATE MAILED HERE b. Place mailed (city, state): PLACE MAILED FROM
5. I served with the *Notice of Hearing—Guardianship or Conservatorship* a copy of the petition or other document referred to in the Notice.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: DATE

SERVER PRINTS NAME

SERVER SIGNS HERE

(TYPE OR PRINT NAME OF PERSON COMPLETING THIS FORM)

(SIGNATURE OF PERSON COMPLETING THIS FORM)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

Name of person served

Address (number, street, city, state, and zip code)

1. NAME OF PERSON SERVED BY MAIL	ADDRESS WHERE NOTICE WAS SENT
2. NAME OF PERSON SERVED BY MAIL	ADDRESS WHERE NOTICE WAS SENT
3. NAME OF PERSON SERVED BY MAIL	ADDRESS WHERE NOTICE WAS SENT
4. NAME OF PERSON SERVED BY MAIL	ADDRESS WHERE NOTICE WAS SENT

Continued on an attachment. (You may use form DE-120(MA)/GC-020(MA) to show additional persons served.)