ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number and Address):			
ATTORNET ORTANTI WITHOUT ATTORNET (Name, 1)	tate Bar (vamoer and ridaress).		
TELEPHONE NO:	FAX NO. (Optional):		
E-MAIL ADDRESS (Optional):	THE NO. (Optional).		
ATTORNEY FOR (Name):			
SUPERIOR COURT OF CALIFORM	NIA, COUNTY OF SAN JOAQUIN		
STREET ADDRESS: 315 W. ELM STREET	,		
MAILING ADDRESS: 315 W. ELM STREET			
CITY AND ZIP CODE: LODI, CA 95240			
BRANCH OF NAME: LODI			
In the Estate Trust Conservatorship Guardianship Other of (Name):		CASE NUMBER:	
☐ Decedent ☐ Conservatee ☐ Minor ☐ Other			
☐ EX PARTE☐ ORDER TO INCREASE BOND AND/OR☐ ORDER TO PLACE FUNDS IN BLOCKED ACCOUNT(S)		HEARING DATE:	
	• •	DEPT:	TIME:
☐ ORDER TO D	ECREASE BOND	11A	THVIL.
		1111	
1. THE COURT FINDS that the facts s	tated in the foregoing Ex Parte Pet	ition to Increase Bond	d
and/or Place Funds in Blocked A	ccount(s) or Petition to Decrease Bond	l (SJPR-005) are true.	
2. THE COURT ORDERS that:			
a. \square Bond should be increased by:	\$ for a total bo	and of \$	
•			1 1
_	Iditional bond is set for	an	d is to be filed by
4:00 pm with the Probate Clerk			
b. □ A total of \$	be placed in one or more blocked accounts as follows:		
Amount (\$)	Name of Institution	Address of Institution	
Amount (\$)	Name of Institution	Address of	Institution
[NOTE: If Item 2b is marked an Ord	ler to Deposit Funds in Blocked Account ((MC-355) is also need	ded.]
☐ See attachment 2b for additional bloc	ked account information		
		D '' C' D1 1 1	4 (MC
•	gment of Receipt of Order and Funds for l	*	`
356) is set for	and is to be filed by 4:	00 pm with the Proba	ite Clerk.
c. \square Bond should be decreased by: \$ for a total bond of \$			
A Due Date for the updated bor			
with the Probate Clerk.			
3. Number of pages attached:	_		
Date:		af the Committee C	
	Judge of the Superior Court		
☐ Signature follows last attachment			