

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> _____			
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN JOAQUIN</b> 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 <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)*