Shall Address (Optional): Bar No: Bar No	ATTORNEY OR PARTY WITHOUT ATTORNEY (Name & Address):			FOR COURT USE ONLY	
Shall Address (Optional): Bar No: Bar No					
DECLARATION OF SERVICE CASE NUMBER:	Telephone No.: E-Mail Address (Optional): ATTORNEY FOR <i>(Name)</i> :				
I, the undersigned, hereby declare that I mailed, or hand delivered a copy of the Petition for Reappointment of Conservator and Notice of Hearing as follows: 1. Date:	SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE Costa Mesa Justice Complex 3390 Harbor Blvd. Costa Mesa, CA 92626-1554				
I, the undersigned, hereby declare that I mailed, or hand delivered a copy of the Petition for Reappointment of Conservator and Notice of Hearing as follows: 1. Date: Mailed Hand Delivered to: Orange County Health Care Agency Mental Health Director 405 West 5th Street, Suite 458 Santa Ana, CA 92701 2. Date: Mailed Hand Delivered to: Orange County Public Guardian P.O. Box 11526 Santa Ana, CA 92711 3. Date: Mailed Hand Delivered to: Orange County Public Defender 200 W. Santa Ana Blvd., Suite 970 Santa Ana, CA 92701 4. Date: Mailed Hand Delivered to: Conservatee: Address: Address: Mailed Hand Delivered to: Facility: Address: Mailed Hand Delivered to: Other:	IN THE MATTER OF:				
I, the undersigned, hereby declare that I mailed, or hand delivered a copy of the Petition for Reappointment of Conservator and Notice of Hearing as follows: 1. Date: Mailed Hand Delivered to: Orange County Health Care Agency Mental Health Director 405 West 5th Street, Suite 458 Santa Ana, CA 92701 2. Date: Mailed Hand Delivered to: Orange County Public Guardian P.O. Box 11526 Santa Ana, CA 92711 3. Date: Mailed Hand Delivered to: Orange County Public Defender 200 W. Santa Ana Blvd., Suite 970 Santa Ana, CA 92701 4. Date: Mailed Hand Delivered to: Conservatee: Address: Address: Mailed Hand Delivered to: Facility: Address: Address: Mailed Hand Delivered to: Other: Address: Address: Mailed Hand Delivered to: Other: Address: Mailed Hand Delivered to: Other: Address: Address: Mailed Hand Delivered to: Other: Address: Mailed Hand Delivered to: Other: Address: Address: Mailed Hand Delivered to: Other:	DECL	ADATION OF SERVICE		CASE NUMBER:	
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5. Date:	3. Date:	_ □ Mailed □ Hand Delivered to:	200 W. Santa Ana Blvd., Suite 970		
Address:	4. Date:	_ □ Mailed □ Hand Delivered to:	Conservatee:Address:		
Address: I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct Date:	5. Date:	_ □ Mailed □ Hand Delivered to:	Facility Addre	y:ss:	
Date:	6. Date:	_ □ Mailed □ Hand Delivered to:	Other: Addres	ss:	
Date:	I declare under penalty of	perjury under the laws of the State of Cal	ifornia that	the foregoing is true and correct	
(TYPE OR PRINT NAME) (SIGNATURE OF CONSERVATOR)	(TYPE OR PRINT NAME)			(SIGNATURE OF CONSERVATOR)	