

CLIENT QUESTIONNAIRE - CONSERVATORSHIP

PART ONE

Your Information and Family Data

- 1. Your Name:
2. Your Address:
3. Your Telephone Number:
4. Are you the proposed conservatee's spouse? YES NO
5. Are you the proposed conservatee's domestic partner? YES NO
6. Does the proposed conservatee owe you any money? YES NO

Proposed Conservatee's Personal and Family Data

- 7. Name (and AKAs):
8. Date of birth:
9. Address during the past five years:
10. Permanent address (if different from above):
11. Can proposed conservatee continue to live where he/she is living? YES NO
12. Physician's name:
13. Physician's address:

14. Physician's telephone number: \_\_\_\_\_

15. Is proposed conservatee a patient in or on leave of absence from a California state institution? YES NO

a. If yes, give name and address of facility: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Is proposed conservatee receiving benefits from the Veterans Administration? YES NO

a. If yes, give address of office and claim number: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. Is proposed conservatee developmentally disabled? YES NO

b. If yes, give address of local regional center working with the proposed conservatee: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Information required to identify persons entitled to notice and to give notice of hearing**

18. Proposed conservatee's spouse or domestic partner

a. Name: \_\_\_\_\_  
b. Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19. Proposed conservatee's first and second degree relatives (children, parents, grandchildren, grandparents, brothers, sisters)

a. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
b. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
c. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
d. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_

- e. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_
- f. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_
- g. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_
- h. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_
- i. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_
- j. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_

20. If no spouse, domestic partner or second-degree relatives, then the following:

- a. Spouse or domestic partner of predeceased parent of proposed conservatee:
  - i. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- b. Children of predeceased spouse of proposed conservatee:
  - i. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
  - ii. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
  - iii. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
  - iv. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- c. Siblings of proposed conservatee's parents:
  - i. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

- ii. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- iii. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- iv. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- v. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

d. Children of proposed conservatee's parents' siblings:

- i. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- ii. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- iii. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- iv. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- v. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- vi. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

e. Children of proposed conservatee's siblings:

- i. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

- ii. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- iii. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- iv. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- v. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_
- vi. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**PART TWO**

**Information for Administering Conservatorship**

21. Bank/Savings & Loan accounts:

- a. Name of branch: \_\_\_\_\_  
Address: \_\_\_\_\_  
Account type and number: \_\_\_\_\_
- b. Name of branch: \_\_\_\_\_  
Address: \_\_\_\_\_  
Account type and number: \_\_\_\_\_
- c. Name of branch: \_\_\_\_\_  
Address: \_\_\_\_\_  
Account type and number: \_\_\_\_\_
- d. Name of branch: \_\_\_\_\_  
Address: \_\_\_\_\_  
Account type and number: \_\_\_\_\_
- e. Name of branch: \_\_\_\_\_  
Address: \_\_\_\_\_  
Account type and number: \_\_\_\_\_

22. Real property (bring deeds, if available):

- a. Address: \_\_\_\_\_  
\_\_\_\_\_
- b. Address: \_\_\_\_\_  
\_\_\_\_\_
- c. Address: \_\_\_\_\_  
\_\_\_\_\_
- d. Address: \_\_\_\_\_  
\_\_\_\_\_
- e. Address: \_\_\_\_\_  
\_\_\_\_\_

23. Securities:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_
- f. \_\_\_\_\_
- g. \_\_\_\_\_
- h. \_\_\_\_\_
- i. \_\_\_\_\_
- j. \_\_\_\_\_

24. Pension and retirement plans:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

25. Tangible personal property:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

26. Insurance policies (e.g., life, health, disability, auto):

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

27. Business interests:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

28. Other property (e.g., royalties, mineral interests, accounts/notes receivable)

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

29. Are there trusts under which proposed conservatee is a beneficiary?    YES                      NO

- a. If yes, list: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

30. Additional asset information:

- a. Safe deposit box (list location of box, contents of box, location of keys, any other person with access): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- b. Does any other person have a claim to any of the proposed conservatee's property?  
YES                      NO

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

c. Does the proposed conservatee have a claim to any other person's property? YES NO

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

d. Is proposed conservatee a party to any contracts? YES NO

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

e. Debts:

i. Name of creditor: \_\_\_\_\_  
Type of debt: \_\_\_\_\_ Amount of debt: \_\_\_\_\_

ii. Name of creditor: \_\_\_\_\_  
Type of debt: \_\_\_\_\_ Amount of debt: \_\_\_\_\_

iii. Name of creditor: \_\_\_\_\_  
Type of debt: \_\_\_\_\_ Amount of debt: \_\_\_\_\_

iv. Name of creditor: \_\_\_\_\_  
Type of debt: \_\_\_\_\_ Amount of debt: \_\_\_\_\_

v. Name of creditor: \_\_\_\_\_  
Type of debt: \_\_\_\_\_ Amount of debt: \_\_\_\_\_

f. What are the proposed conservatee's testamentary plans? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

i. Name of attorney/party who assisted in the estate planning:  
\_\_\_\_\_

g. Does the proposed conservatee have any estate planning documents? WILL TRUST OTHER

i. Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

