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		ATTACHMENT PB-4040
ATTORNEY OR PARTY WITHOUT ATTO	ORNEY (Name, State Bar Number and Address):	FOR COURT USE ONLY
TELEPHONE NUMBER:	FAX NUMBER (Optional):	
EMAIL ADDRESS (Optional):		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF	CALIFORNIA, COUNTY OF SANTA CLARA	
,	lorth First Street losé. California 95113	
	ate Division	
CONSERVATORSHIP OF (na	me):	
		CASE NUMBER:
PETITION T	O REMOVE CONSERVATOR	
I, (my name)		, declare:
I am a: 🗌 Conservator	Other:	
I am petitioning to remov	e (name)	as
conservator for the follow	ving reasons:	
-		
Check here if you nee	ed more space. Continue to explain on a separa	ate piece of paper and attach it to this page.
I declare under penalty o own knowledge.	of perjury of the laws of the State of California	that the foregoing is true and correct of my
Today's date	Print your name here	Sign your name here