ATTACHMENT PB-4076

ATTORNEY OR PARTY WITHOUT ATTORNEY(Name, State Bar Number and Address):	FOR COURT USE ONLY
Telephone: Fax Number:	
Email Address (optional):	
ATTORNEY FOR (name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA STREET ADDRESS: 191 North First Street	
MAILING ADDRESS: 191 North First Street	
CITY AND ZIP CODE: San Jose, CA 95113	
BRANCH NAME:	
IN RE: THE CONSERVATORSHIP OF:	
	CASE NUMBER
VERIFICATION OF VIEWING OF CONSERVATORSHIP VIDEO	
INSTRUCTIONS	
Before you may be appointed as a conservator, you must watch a video called With Heart: Understanding Conservatorships . This video discusses the duties and responsibilities of a conservator.	
The video is evailable to you in two ways:	
The video is available to you in two ways: 1. You may make an appointment with the Court Investigators Office to view it at the courthouse.	
2. You may view the video online at https://www.youtube.com/watc	
Once you have watched the video, you must fill out, sign, and file this form with the court.	
I have petitioned the court to be appointed the conservator of the person and/or estate of	
(Name):	
I viewed the court's videotape presentation on the duties and respon	sibilities of the conservator on
Date: at the following location:	
At the Courthouse by appointment with the Court Investigator Office.	
On-line viewing located at https://www.youtube.com/watch?v=A-SX6YkFsP4	
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	
Print Name Signature	