<u>ATTORNEY OF RECORD:</u> TO BE COMPLETED BY THE CONSERVATOR AND FILED THIRTY DAYS PRIOR TO THE GENERAL PLAN HEARING DATE. <u>THE</u> <u>CONSERVATOR SHOULD RETAIN A COPY</u>. A COPY OF THE PLAN AND INVENTORY AND APPRAISMENT MUST BE SENT TO THE COURT INVESTIGATORS OFFICE.

## SUPERIOR COURT OF CALIFORNIA

## COUNTY OF ALAMEDA

	servatorship of the )	Probate No.
[pers	on/and/estate] of ) ) )	CONSERVATORSHIP GENERAL PLAN
	) <u>conservatee</u> )	Date: Time: Department:
Plan	in compliance with Local Court Ru	, the conservator(s) of the person/estate of hereby submits the conservator's General les.
1.	Conservatee Information:	
	Date of Birth:	
	Social Security Number:	
2.	Address:	
	Telephone:	
3.	Conservatee's residence:	

- \_\_\_\_own home/apartment \_\_\_\_\_conservator's home/apartment
- \_\_\_\_skilled nursing home \_\_\_\_board and care home
- \_\_\_\_hospital (medical/psychiatric)\_\_\_\_other (specify)\_\_\_\_\_

How long has the Conservatee been in the present residence?\_\_\_\_\_

Do you anticipate making any changes in the Conservatee's residence in the next year? \_\_\_\_\_No \_\_\_\_Yes (explain)\_\_\_\_\_

## Please note that the Court Investigator's Office must be notified of any change of address.

4.	Current level of care:			
	requires total care	requires	s assistance with care	
		has fee	•	
	ambulatory		heelchair/walker	
	_urinary/bowel incontinence	ehas a c	atheter	
Othe	er relevant information			
5.	Conservatee's physical	and medical conditio	n:	
-	in good health	is developmen	tally disabled	
	confusion/disorientation	unable to read	/write	
	memory loss	deaf or commu		
	takes regular medications			
Plea	ase list health problems			
	v often does the Conservatee tor's name		•	
000				
	any other health providers in			
	visiting nurse	social worker		
	_podiatrist	dentist		
	counselor	physical thera		
	_speech therapist	other (specify	/)	
6.	How often do you expec	t to visit the Conserv	atee?	
7.	Will other family or frien	ds visit the Conserva	tee?	
8.	Do you plan to request	conservator fees at th	e end of the first year?	
	NoYes (antici			
9.		•	e (complete even if	a
_	conservatorship of the			
Soc	ial Security/SSI \$	Dividends	\$	
Pen	sion (source) \$	Rental	\$	
Vete	eran's benefits \$	Interest	\$	
Othe	er (specify)		\$	
Othe	er (specity)		Φ	

Total Estimated Monthly Income \$\_\_\_\_\_

10. Conservatee's Estimated Monthly Expenses (complete even if a conservatorship of the person only)

LIVIN	IG EXPENSES					
	Rent/Mortgage	\$	Utilities	\$		
	Nursing/Care Home	\$	In-home care	\$		
	Food	\$	Clothing	\$		
	Medical/Dental	\$	Medications	\$		
	Transportation	\$	Entertainment	\$		
	Other (specify)			\$		
	Total Es	stimated Month	nly Expenses \$			
11.	Other Expenses					
TAX	ES ( Income Tax _ Property _ Payroll _	Current Yes Yes Yes	Estimated Amoun No\$ _No\$ No\$	_		
INSU	IRANCE					
Rente Autor	mobile er's Comp	\$ \$	\$ \$			
Does	the Conservatee receiv		nefits? share of cost			
12.	. Do you expect to sell any of the Conservatee's real or personal property in the next year?NoYes If yes, explain why:					
13.		lf Yes, is i	n which he/she does not t_rented? Amour			
	If the conservatee's more explain how the shortfal		s are greater than month	Ily income,		

<sup>15.</sup> Does the conservatee have a trust or is he/she entitled to receive income from a trust? \_\_\_\_\_If so, please provide an attachment with the name of the trust, any court case number for the trust, the name(s)of the trustee(s)

and their contact information.

16. Do you anticipate any unusual activities related to the management of the conservatee's estate during the next year?

\_\_\_\_No \_\_\_\_Yes (explain)\_\_\_\_\_

The undersigned conservator will:

- a. Inventory all assets in which the conservatee has any interest;
- b. Render timely, accurate and complete accountings to the court;
- c. Carry out all mandatory usual and general duties of a conservator;
- d. Maintain periodic contract with the conservatee's physician and other health care providers, if appointed conservator of the person;
- e. Maintain periodic contract with the conservatee's family and friends, if applicable;
- f. Be available to the conservatee on a 24-hour basis for emergencies, or arrange for such coverage by a qualified agent;
- g. Maintain accurate records related to the estate;
- h. Maintain all estate assets in a separate identifiable manner;
- i. Maintain estate cash assets in interest-bearing accounts, except as necessary for everyday administration;
- j. Maintain an adequate surety bond as required by law.
- k. Update case plan as needed.
- I. Refer to the "Conservator's Handbook".

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct, and that I have retained a copy of this case plan for my records.

Dated:

Signature of Conservator(s)

Rev: 9/06; Ct. Inv.

Type or print name(s)