ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME, STATE BAR NUMBER AND ADDRESS)		FOR COURT USE ONLY	
TELEPHONE NUMBER:	FAX NO. (Optional):		
EMAIL ADDRESS (Optional):			
ATTORNEY FOR (Name):			
SUPERIOR COURT OF C	CALIFORNIA, COUNTY OF SAN LUIS O	OBISPO	
STREET ADDRESS: MAILING ADDRESS:	1035 Palm Street, Room 385 Same as above		
CITY AND ZIP CODE:	San Luis Obispo, CA 93408		
BRANCH NAME:	San Luis Obispo Division		
I DO CONGEDIA EC	DRILLID OF	CASE NUMBER.	
LPS CONSERVATO	KSHIP OF:	CASE NUMBER:	
	ORDER REAPPOINTING LP	'S CONSERVATOR	
1. The petition for t	• •	nservator of the person of (name):	
		came regularly for hearing on	
(date):	(Name):		
appeared on bel	nalf of the proposed LPS conse	ervatee.	
(Check applicab	le box):		
_			
☐ The conserva	tee was present in court and w	as advised of his or her right to a	
court or jury t			
oourt or jury t			
☐ The presence	e of the conservatee was waive	2d	
— mo procono	y or the deficer value was warve	, a.	
☐ The concern	otoo did not woive bie or ber ric	what to trial but concented to the	
	_	ght to trial, but consented to the	
reappointment of a	conservator by the court.		
2. THE COURT FIN	IDS , after examining the petition	on and hearing the evidence, that	
a. All notices of the hearing have been given as required by law.			
	ervatee is still gravely disabled	· · · · · · · · · · · · · · · · · · ·	
	of §5350 of the Welfare and In		
		tee that a conservator of his or her	
	e reappointed.		

Form Adopted for Optional Use San Luis Obispo Superior Court Local Form PR014 Rev. 1/1/15

LPS CONSERVATORSHIP OF:		CASE NUMBER	
	ORDERED, (Name):	is	
u.	reappointed conservator of the person and/ or estate of (name): and appropriate LPS		
	Letters of conservatorship shall be issued the oath required by §2300 of the Probate	to the LPS conservator upon filing	
b.	The LPS conservator shall have the power to require the conservatee to receive treatment related specifically to remedying or preventing the recurrence of the Conservatee's being gravely disabled and to require the LPS conservatee to receive treatment for an existing or continuing medical condition described as follows (specify):		
C.		ed medical and social welfare zed to require that the conservatee treatment for the purpose of this conservatee in a medical, d facility or state hospital, county of the University of California, conmedical facility approved by the agency accredited by the State	
d.	The LPS conservatee shall not have the rig	ght to (check all that apply):	
	i. Dossess a license to operate a	motor vehicle;	
	ii. To possess or carry firearms;		
	iii. To enter into contracts;		
	iv. To vote.		
e.	The Court determined that a (check one):		

LPS CONSERVATORSHIP OF:	CASE NUMBER
i. public locked facility ii. private locked facility iii. private unlocked facility iv. board and care facility v. other (specify): is the least restrictive and most approximate. f. The reappointment shall be effective as of g. The 1 year -LPS conservatorship shall term unless an LPS conservator is earlier reappoint.	opriate placement for the LPS (date): minate on (date):, pointed.
Date: Judge of the	e Superior Court
Judge of the	e Superior Court