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| ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):<br><br><hr/><br>TELEPHONE NO.: _____ FAX NO. (Optional): _____<br>E-MAIL ADDRESS (Optional): _____<br>ATTORNEY FOR (Name): _____   | <b>FOR COURT USE ONLY</b> |
| <b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b><br>STREET ADDRESS:<br>MAILING ADDRESS:<br>CITY AND ZIP CODE:<br>BRANCH NAME:  |                           |
| <input type="checkbox"/> ESTATE OR TRUST <input type="checkbox"/> CONSERVATORSHIP <input type="checkbox"/> GUARDIANSHIP <input type="checkbox"/> OTHER<br>OF (Name):<br><br><input type="checkbox"/> DECEDENT <input type="checkbox"/> CONSERVATEE <input type="checkbox"/> MINOR <input type="checkbox"/> OTHER |                           |
| <b>CITATION—PROBATE*</b>   | CASE NUMBER: _____        |

1. **TO** (name):
2. **You are hereby cited and required to appear at a hearing in this court on**

|          |       |        |       |
|----------|-------|--------|-------|
| a. Date: | Time: | Dept.: | Room: |
|----------|-------|--------|-------|

b. Address of court:     same as noted above     other (specify):

3. At this hearing you are required to give any legal reason why the relief requested in the verified petition attached to and served with this citation, and filed with this court, should not be granted.

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| Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available upon request if at least 5 days notice is provided. Contact the clerk's office for <i>Request for Accommodations by Persons With Disabilities and Order</i> (form MC-410). (Civil Code section 54.8.) |  |
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Date: \_\_\_\_\_ Clerk, by \_\_\_\_\_, Deputy

|        |   |
|--------|---|
| (SEAL) | <p><b>NOTICE TO THE PERSON SERVED:</b> You are served</p> <p>a. <input type="checkbox"/> as an individual.</p> <p>b. <input type="checkbox"/> as the person cited under the fictitious name of (specify):</p><br><p>c. <input type="checkbox"/> On behalf of (specify):</p> <p style="padding-left: 20px;">under</p> <p style="padding-left: 40px;"><input type="checkbox"/> Code Civ. Proc., § 416.10 (corporation)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Code Civ. Proc., § 416.20 (defunct corporation)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Code Civ. Proc., § 416.40 (association or partnership)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Code Civ. Proc., § 416.60 (minor)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Code Civ. Proc., § 416.90 (individual)</p> <p style="padding-left: 40px;"><input type="checkbox"/> other (specify):</p> <p>d. by personal delivery on (date):</p> |
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\* For use in all proceedings under the Probate Code EXCEPT to start a conservatorship.  
 Use *Citation for Conservatorship* (form GC-320) for that purpose.

|  |  |                                       |                                |              |
|--|--|---------------------------------------|--------------------------------|--------------|
| <input type="checkbox"/> ESTATE OR TRUST | <input type="checkbox"/> CONSERVATORSHIP | <input type="checkbox"/> GUARDIANSHIP | <input type="checkbox"/> OTHER | CASE NUMBER: |
| OF (NAME):                               |  |                                       |                                |              |

**PROOF OF SERVICE**

1. At the time of service I was at least 18 years of age and not a party to this action, and I **served copies** of the *Citation—Probate* and the following documents (*specify*):
  2. a. Party served (*specify name of party as shown on the documents served*):
  - b. Person served: (1)  party in item 2a (2)  other (*specify name and title or relationship to the party named in item 2a*):
  - c. Address (*specify*):
  
3. I served the party named in item 2
  - a.  **by personally delivering** the copies (1) on (*date*): \_\_\_\_\_ (2) at (*time*): \_\_\_\_\_
  - b.  **by leaving** the copies with or in the presence of (*name and title or relationship to person indicated in item 2b*):
    - (1)  (**business**) a person at least 18 years of age apparently in charge at the office or usual place of business of the person served. I informed him or her of the general nature of the papers.
    - (2)  (**residence**) a competent member of the household (at least 18 years of age) at the dwelling house or usual place of abode of the person served. I informed him or her of the general nature of the papers.
    - (3) on (*date*): \_\_\_\_\_ (4) at (*time*): \_\_\_\_\_
    - (5)  A **declaration of diligence** is attached. (*Substituted service on natural person, minor, conservatee, or political candidate.*)
  - c.  **by mailing** the copies to the person served, addressed as shown in item 2c, by first-class mail, postage prepaid,
    - (1) on (*date*): \_\_\_\_\_ (2) from (*city*): \_\_\_\_\_
    - (3)  with two copies of the *Notice and Acknowledgment of Receipt—Civil* and a postage-paid return envelope addressed to me. (*Attach completed Notice and Acknowledgment of Receipt—Civil (form POS-015.)*)
    - (4)  to an address outside California with return receipt requested. (*Attach completed return receipt.*)
  - d.  **other** (*specify other manner of service and authorizing code section*): \_\_\_\_\_
  
4. The "Notice to the Person Served" (on the citation) was completed as follows:
  - a.  as an individual defendant.
  - b.  as the person sued under the fictitious name of (*specify*): \_\_\_\_\_
  - c.  On behalf of (*specify*): \_\_\_\_\_
 

|   |   |
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| under <input type="checkbox"/> Code Civ. Proc., § 416.10 (corporation)          | <input type="checkbox"/> Code Civ. Proc., § 416.60 (minor)      |
| <input type="checkbox"/> Code Civ. Proc., § 416.20 (defunct corporation)        | <input type="checkbox"/> Code Civ. Proc., § 416.90 (individual) |
| <input type="checkbox"/> Code Civ. Proc., § 416.40 (association or partnership) | <input type="checkbox"/> other ( <i>specify</i> ): _____        |
  
5. a. Person serving (*name, address, and telephone number*): \_\_\_\_\_
  - d.  Exempt from registration under Business and Professions Code, § 22350(b).
  - e.  Registered California process server.
    - (1)  Employee or independent contractor
    - (2) Registration no. (*specify*): \_\_\_\_\_
    - (3) County (*specify*): \_\_\_\_\_
    - (4) Expiration (*date*): \_\_\_\_\_
  
- b.  **Fee** for service: \$ \_\_\_\_\_
- c.  Not a registered California process server.

6.  I **declare** under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

7.  I **am a California sheriff or marshal** and I certify that the foregoing is true and correct.

Date: \_\_\_\_\_



(SIGNATURE OF PERSON SERVING)