| ATTORNEY OR PARTY  | WITHOUT ATTORNEY (Name, State Bar number, and address): | FOR COURT USE ONLY                 |
|--|---|------------------------------------|
| TELEPHONE NO.:<br>E-MAIL ADDRESS (Optic  | ,   |                                    |
| ATTORNEY FOR (Name):   |   | -                                  |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF SOLANO   |   |                                    |
| STREET ADDRESS:  | 600 Union Avenue  |                                    |
| MAILING ADDRESS:   | P.O. Caller 5000  |                                    |
| CITY AND ZIP CODE:   | Fairfield, CA 94533                                     |                                    |
| GUARDIANSHIP OF  |   | HEARING DATE, TIME AND DEPARTMENT: |
| (Name):  |   |                                    |
| ORDER APPOINTING INVESTIGATOR AND<br>NOTICE OF INVESTIGATION COSTS<br>Guardianship of  Person Estate |   | CASE NUMBER:                       |

## NOTICE OF INVESTIGATION COSTS

If the proposed guardian is a relative of the proposed minor ward, the proposed guardian may be required to pay some or all of the court investigation costs, which are usually between \$400.00 and \$500.00. The court investigator's office will advise the proposed guardian of the actual costs. The assessed costs must be paid no later than 30 days after the proposed guardian is notified of the assessment. If the proposed guardian believes he or she cannot afford the investigation costs, he or she may request a fee waiver application from the clerk of the court.

- I, \_\_\_\_\_, declare that I am the petitioner in this matter. I further declare that:
- 1. I am the proposed guardian and I understand there may be costs associated with the guardianship investigation. I agree to pay those costs as ordered. I understand that if I do not pay as ordered, that the court may impose sanctions or other remedies as permitted by law.
- 2. I am not the proposed guardian. The proposed guardian is:

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

Date:

(Signature of Petitioner)

## DO NOT WRITE BELOW THIS LINE - FOR COURT USE ONLY

TO: Court Investigators Office 600 Union Avenue Fairfield, CA 94533 (Relative Guardianships)  Supervisor - Court Unit, Children's Bureau Dept. of Health & Social Services
 275 Beck Avenue MS5-230
 Fairfield, CA 94533
 (Non-Relative Guardianships)

1. You are hereby appointed to investigate the above-entitled matter. You are directed to:

- (a) Review the basis for the guardianship;
- (b) Evaluate the performance of the guardian in existing guardianships;
- (c) Determine whether the initiation or continuation of the guardianship is in the minor's best interests;
- (d) Determine if any changes should be made in the guardianship;
- (e) Report the minor's wishes, if any, to the Court; and,
- (f) Report your findings to the Court before the hearing.
- 2. The court reserves jurisdiction to reallocate, waive, or order reimbursement of any costs assessed in connection with this investigation.

## It is so ordered.

Date:

Judge/Commissioner of the Superior Court