

LAWYER REFERRAL & INFORMATION SERVICE
of the
San Diego County Bar Association

Application for CONSERVATORSHIP Panel Membership

Complete this form and return to the LAWYER REFERRAL & INFORMATION SERVICE,
1333 Seventh Avenue, San Diego, California, 92101.

FOR OFFICE USE ONLY			
State Bar Date _____	State Bar # _____	Record of Discipline	___ YES ___ NO
SDCBA Member ___ YES ___ NO		Insurance Expiration _____	

(PLEASE TYPE or PRINT BELOW)

(Last Name) _____ (First Name) _____ (Initial) _____ (Telephone) _____

(Complete Office Address Including Zip Code)

I, _____, declare that:

1. I have acted as or represented a conservator in at least four (4) private conservatorship administrations through the completion of the first accounting.

Case Name	Court and File Number	Description of Matter	Date of First Accounting
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(a)

(b)

(c)

(d)

3. Other information which I believe may be relevant: (Optional)

4. Attach exhibits if necessary.

5. Attached are two "Recommendation of Professional Qualification" forms from California lawyers or judges attesting to my qualifications in the area for which I am applying. **These form letters specifically reflect the authors' knowledge of my qualifications and include the writers' opportunity to observe my qualifications in the area for which I am applying.** If these form letters are from lawyers, they are not affiliated with my firm nor do I have any economic interest with them. (Revised 5/00)

6. I am not now nor have I been the subject of any bar association disciplinary proceedings, and I further state that I have never been the subject of suspension or disbarment.

Executed at _____, California, on _____, 20 _____.

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

(Signature)