

ATTORNEY OR PARTY WITHOUT ATTORNEY: ACBCI/STATE BAR NO: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY
AGUA CALIENTE BAND OF CAHUILLA INDIANS TRIBAL COURT STREET ADDRESS: 980 E. Tahquitz Canyon Way CITY AND ZIP CODE: Palm Springs, CA 92262	
GUARDIANSHIP OF THE OF <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE (name): DEPENDENT ADULT	
NOTICE OF THE DEPENDENT ADULT'S DEATH	

CASE NUMBER:

TO ALL PERSONS INTERESTED IN THIS GUARDIANSHIP:

PLEASE TAKE NOTICE that the above-named dependent adult died on

(date):

I declare under penalty of perjury under the laws of the Agua Caliente Band of Cahuilla Indians that the foregoing is true and correct. Date:

(TYPE OR PRINT NAME OF GUARDIAN OF THE PERSON)



(SIGNATURE OF GUARDIAN OF THE PERSON)

GUARDIANSHIP OF THE OF <input type="checkbox"/> PERSON <input type="checkbox"/> ESTATE (name): _____ <div style="text-align: right;">DEPENDENT ADULT</div>	CASE NUMBER
--	-------------------------

NOTE TO GUARDIAN OF THE PERSON:

You must "serve"—deliver—copies of this *Notice of the Dependent Adult's Death* ("Notice") to each person who has the right to be notified of the date, time, place, and purpose of a court hearing in a guardianship. You, your employee in your practice as a professional fiduciary, your attorney in this matter, or an employee in your attorney's office, may deliver this Notice by mail. You may also personally deliver, or arrange for another adult person to personally deliver, the Notice instead of mailing it. You must show the court that copies of this Notice have been delivered in ways the law allows. You do this by completing a proof of delivery, also called "proof of service" and having the person who did the mailing sign the proof of service, which then is filed with the original Notice. This page contains a proof of delivery that may be used only to show delivery by mail. To show personal delivery, the person who makes the personal delivery must complete and sign a proof of personal delivery to all persons to whom he or she delivers copies of this document and attach the signed copy of that proof of delivery to this Notice when it is filed with the court. You may use *Proof of Personal Service-Civil* (form POS-020) to show personal delivery.

PROOF OF DELIVERY BY MAIL

1. I am the guardian of the person; an employee of the guardian of the person in his/her practice as a professional fiduciary; an attorney for the guardian of the person; an employee in the office of an attorney for the guardian of the person, of the above-named dependent adult. I am a resident of or employed in the county where the mailing occurred.
2. My residence or business address is (*specify*): _____
3. I delivered the foregoing *Notice of the Dependent Adult's Death* to each person named below by enclosing a copy in an envelope addressed as shown below AND
 - a. personally depositing the sealed envelope with the United States Postal Service on the date and at the place shown in item 4 with the postage fully prepaid.
 - b. placing the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.
4. a. Date mailed: _____ b. Place mailed (*city, state*): _____

I declare under penalty of perjury under the laws of the Agua Caliente Band of Cahuilla Indians that the foregoing is true and correct. Date: _____

_____ (TYPE OR PRINT NAME OF PERSON COMPLETING THIS FORM)		_____ (SIGNATURE OF PERSON COMPLETING THIS FORM)
--	--	---

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

	<u>Name of person served</u>	<u>Address (number, street, city, state, and zip code)</u>
1.		
2.		
3.		

Continued on an attachment.