

OBJECTION TO PETITION FOR APPOINTMENT OF GUARDIAN

FORMS ARE AVAILABLE ONLINE AT WWW.SUTTERCOURTS.COM OR WWW.COURTS.CA.GOV

The following forms are used when filing an Objection to a Petition for Guardianship:

- **GC-215: Objection to Petition for Appointment of Guardian**
- **FL-335: Proof of Service by Mail**

Information and Instructions

1. Complete the Objection to Petition for Appointment of Guardian. See the attached instructions for assistance.
2. Make enough copies to serve on the Proposed Guardian(s), the child's parents, grandparents, and siblings over the age of 12, plus one copy for yourself.
3. Bring your original Objection and all of the copies to the courthouse to be filed. The court will keep the original, file stamp the copies, and return the copies to you.
4. Someone over the age of 18 who is not you will need to mail a stamped copy of your objection to the Proposed Guardian(s), the child's parents, grandparents, and siblings over the age of 12, and then complete a Proof of Service by Mail (FL-335) for each.
5. File all of the Proofs of Service with the court.
6. Participate in the Guardianship Investigation.
7. Go to the court date for the Petition for Guardianship.

Revised 01/01/2023

**SUPERIOR COURT OF CALIFORNIA
COUNTY OF SUTTER**

**FAMILY LAW FACILITATOR
FAMILY LAW INFORMATION CENTER**



530-822-3305

ATTORNEY OR PARTY WITHOUT ATTORNEY		STATE BAR NUMBER:	FOR COURT USE ONLY
NAME:	YOUR NAME		
FIRM NAME:			
STREET ADDRESS:	YOUR STREET ADDRESS		
CITY:	YOUR CITY, STATE, ZIP CODE	STATE: ZIP CODE:	
TELEPHONE NO.:	YOUR TELEPHONE NUMBER	FAX NO.:	
EMAIL ADDRESS:			
ATTORNEY FOR (name):			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		COUNTY NAME	
STREET ADDRESS:			
MAILING ADDRESS:	COURT'S PHYSICAL ADDRESS		
CITY AND ZIP CODE:	COURT'S CITY, STATE, ZIP CODE		
BRANCH NAME:			
GUARDIANSHIP OF THE <input checked="" type="checkbox"/> PERSON <input type="checkbox"/> ESTATE OF		CASE NUMBER:	
(name(s)):		CHILD(REN)'S NAME(S)	COURT CASE NUMBER
		MINOR(S)	
OBJECTION TO PETITION FOR APPOINTMENT OF GUARDIAN		HEARING DATE:	
		DEPT.:	TIME:

1. I (name): YOUR NAME object to the petition for appointment of a guardian filed by (name of petitioner): PROPOSED GUARDIAN'S NAME

2. My objection concerns the following child or children (give full name and date of birth for each):
 a. Child (name): CHILD(REN)'S FULL NAME(S) (date of birth): CHILD(REN)'S DATE(S) OF BIRTH
 b. Child (name): (date of birth):
 If there are more children, identify them on a separate piece of paper, attach it to this form, and label it as Attachment 2.

3. My relationship to the child or children named in item 2 is (tell the court about your connection with the child, children, or family):
 WHAT IS YOUR RELATIONSHIP TO THE CHILD?

If you need more space, use a separate piece of paper, attach it to this form, and label it as Attachment 3.
 4. I object to a guardianship of the child or children named in item 2 because (if you think the court should not appoint a guardian, tell the court why):

IF YOU DO NOT WANT THE COURT TO APPOINT A GUARDIAN FOR THE CHILD, CHECK #4 AND EXPLAIN WHY.
 IF YOU NEED MORE SPACE, CHECK THE BOX BELOW AND USE AN ATTACHMENT PAGE.

If you need more space, use a separate piece of paper, attach it to this form, and label it as Attachment 4.
 5. I object to the person the petitioner has asked the court to appoint as guardian because (if you think that person should not be the guardian, tell the court why):

IF YOU DO NOT WANT THE COURT TO APPOINT THE PROPOSED GUARDIAN AS THE GUARDIAN FOR THE CHILD, CHECK #5 AND EXPLAIN WHY.
 IF YOU NEED MORE SPACE, CHECK THE BOX BELOW AND USE AN ATTACHMENT PAGE.

If you need more space, use a separate piece of paper, attach it to this form, and label it as Attachment 5.

GUARDIANSHIP OF (name): <div style="border: 1px solid red; padding: 2px; text-align: center; color: red;">CHILD(REN)'S NAME(S)</div>	CASE NUMBER: <div style="border: 1px solid red; padding: 2px; text-align: center; color: red;">COURT CASE NUMBER</div>
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6. I object to other requests in the petition because (if you object to other requests in the petition, tell the court which specific requests you object to and why you object to each one):

IF YOU DO NOT WANT THE COURT TO ORDER THE PROPOSED GUARDIAN'S OTHER REQUESTS FROM THE PETITION, CHECK #6 AND EXPLAIN WHY.

IF YOU NEED MORE SPACE, CHECK THE BOX BELOW AND USE AN ATTACHMENT PAGE.

If you need more space, use a separate piece of paper, attach it to this form, and label it as Attachment 6.

Date:

(TYPE OR PRINT NAME)



(SIGNATURE OF ATTORNEY)

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

Date:

DATE

PRINT NAME

(TYPE OR PRINT NAME)



SIGN NAME

(SIGNATURE OF OBJECTOR)

(TYPE OR PRINT NAME)



(SIGNATURE OF OBJECTOR)

Names and signatures of additional objectors follow last attachment.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): <div style="border: 1px solid red; padding: 5px; margin: 5px 0;"> YOUR NAME YOUR STREET ADDRESS YOUR CITY, STATE, ZIP </div> TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF COUNTY NAME STREET ADDRESS: _____ MAILING ADDRESS: COURT'S PHYSICAL ADDRESS CITY AND ZIP CODE: COURT'S CITY, STATE, ZIP CODE BRANCH NAME: _____	
PETITIONER/PLAINTIFF: _____ RESPONDENT/DEFENDANT: _____ OTHER PARENT/PARTY: _____	CASE NUMBER: CASE NUMBER (if applicable, provide): HEARING DATE: _____ HEARING TIME: _____ DEPT.: _____
PROOF OF SERVICE BY MAIL	

NOTICE: To serve temporary restraining orders you must use personal service (see form FL-330).

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.

2. My residence or business address is:

**SERVER'S STREET ADDRESS
SERVER'S CITY, STATE, ZIP**

3. I served a copy of the following documents (specify):

WRITE IN THE NAME AND FORM NUMBER OF THE DOCUMENT YOU ARE HAVING SERVED.

by enclosing them in an envelope AND

CHECK THE APPROPRIATE BOX

- a. depositing the sealed envelope with the United States Postal Service 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. The envelope was addressed and mailed as follows:

- a. Name of person served: **OTHER PARTY'S NAME**
- b. Address: **ADDRESS WHERE THE DOCUMENTS WERE MAILED**
- c. Date mailed: **DATE MAILED**
- d. Place of mailing (city and state): **CITY AND STATE WHERE MAILED**

5. I served a request to modify a child custody, visitation, or child support judgment or permanent order which included an address verification declaration. (Declaration Regarding Address Verification—Postjudgment Request to Modify a Child Custody, Visitation, or Child Support Order (form FL-334) may be used for this purpose.)

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

Date: **DATE**

PRINT SERVER'S NAME

SIGNATURE OF SERVER

(TYPE OR PRINT NAME)

(SIGNATURE OF PERSON COMPLETING THIS FORM)