

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

GUARDIANSHIP OF (name): <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-left: 100px;">CHILD(REN)'S NAME(S)</div>	CASE NUMBER: <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-left: 100px;">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

(TYPE OR PRINT NAME)

▶

PRINT NAME

(TYPE OR PRINT NAME)

▶

SIGN NAME

(SIGNATURE OF OBJECTOR)

▶

(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)