

REFERRAL FOR INVESTIGATOR'S REPORT
PER PROBATE CODE § 1826

Name and Address of Attorney or Typing Service

CASE NUMBER: BPB- _____

Proposed Conservatee's Information:

Legal Name: _____ Nick Name: _____

Current Address: _____

Name of Facility/Group Home: _____

Contact Person: _____

Name and Address of Day Program/School/Employer: _____

Contact Person: _____

If Kern Regional Center Client, Name and telephone number of Service Coordinator:

Proposed Conservator(s) Information:

Name:

Preferred Contact Phone #

English Speaking?

Date

Signature of Person Completing form