

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS):	TELEPHONE NO.:	<i>FOR COURT USE ONLY</i>
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF TULARE STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE:		
BRANCHNAME		
Guardianship <input type="checkbox"/> Conservatorship Estate of		
DECLARATION OF DUE DILIGENCE		CASE NUMBER:

Note: Please use one form for each person you are unable to serve/locate.

I, the undersigned, declare:

1. I made a reasonable search and cannot locate and serve the following person:

Name	Relationship to Minor/Conservator/Decedent

2. I do not know the name of the person I am to serve and I am unable to find out that information because:

3. The last known address of the person named in paragraph 1 is:

4. I spoke with the following relatives and friends of the person named in paragraph 1, or others having knowledge of the person's whereabouts:

Name	Date of Contact	Relationship to Missing Person	Result

(Complete at least three of items 5 through 9.)

5. I searched the telephone directory for _____ County (where the person was last known to live) and this was the result:

6. I contacted the California Prisoner Locator System at (916) 445-6713 and this was the result [complete only if there is reason to believe the person is in a prison in California]:

Insert case Name:	CASE NUMBER:
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7. I searched the Internet to locate the person and this was the result:

8. I checked with the following persons who may have knowledge concerning the whereabouts of the person named in paragraph 1:

Last known employer	Date of contact	Result

Last known landlord	Date of contact	Result

9. I searched the following public records in _____ County with the following result:

Tax Assessor's Name Index	
Voter Registration Records	
Other	

10. The last contact I had with the person named in paragraph 1 or the last information I had concerning his/her whereabouts is as follows: (MANDATORY)

11. (If requesting notice by publication) The newspaper most likely to give notice is _____

Because _____

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

Executed on (date) _____, at (city) _____, California.

Type or print name _____ Signature _____