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CONFIDENTIAL—FOR COURT USE ONLY

GC-011

SUPERIOR COURT OF CALIFORNIA,

COUNTY OF

STREET ADDRESS:

MAILING ADDRESS:

CITY AND ZIP CODE:

(Do not file or lodge in case file)

CERTIFYING ATTORNEY *(Name):* State Bar No.:

ANNUAL CERTIFICATION OF COURT-APPOINTED ATTORNEY

NOTICE TO ATTORNEYS APPOINTED BY THE COURT IN PROBATE CONSERVATORSHIPS OR GUARDIANSHIPS

1. Beginning in 2008, you must complete three hours of continuing education each calendar year that qualifies for Minimum Continuing Legal Education (MCLE) credit for California State Bar–certified specialists in estate planning, trust, and probate law. (See Cal. Rules of Court, rule 7.1101(f).)
2. Beginning in 2009, you must certify to the court before the end of March of each year that (1) you completed the required continuing education during the previous calendar year, and (2) your State Bar disciplinary history and professional liability insurance or self-insurance coverage either have or have not changed since your qualification certification or last annual certification was filed. You must also describe any changes in your disciplinary history and insurance or self-insurance coverage. (See rule 7.1101(h)(4) and (5).)

I certify as follows *(check all boxes that apply):*

1. a. ☐ I have had no State Bar discipline imposed since the date of my qualification certification or my last annual certification.
   b. ☐ I have had State Bar discipline imposed since the date of my qualification certification or my last annual certification. The circumstances are described in Attachment 1b.
2. a. ☐ My professional liability insurance coverage (rule 7.1101(b)(3)), adequacy of self-insurance (rule 7.1101(e)(2)), or self-insurance program coverage (rule 7.1101(c)(2)) has not changed since the date of my qualification certification or my last annual certification.
   b. ☐ My professional liability insurance, adequacy of self-insurance, or self-insurance program coverage has changed since the date of my qualification certification or my last continuing education certification. My current circumstances are described in Attachment 2b.
3. My contact information is ☐ as stated in my qualification certification or last annual certification. ☐ as follows:
   a. Firm or employer name:
   b. Address:
   c. Telephone number: d. Fax number:
   e. E-mail address:
4. During calendar year _____, I completed a total of *(specify):* _____ hours of continuing education that qualifies for MCLE credit for State Bar-certified specialists in estate planning, trust, and probate law, as follows:

Provider	Subject	Hours
		_____
		_____
		_____

Total hours: _____

I certify that the foregoing is true and correct.

Dated:

(TYPE OR PRINT NAME OF CERTIFYING ATTORNEY) (SIGNATURE)

Form Adopted for Mandatory Use
Judicial Council of California
GC-011 [New January 1, 2009]

ANNUAL CERTIFICATION OF COURT-APPOINTED ATTORNEY
(Probate—Guardianships and Conservatorships)

Probate Code, §§ 1456, 1470, 1471;
Cal. Rules of Court, rule 7.1101
www.courtinfo.ca.gov

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