

ATTORNEY OR PARTY WITHOUT ATTORNEY (NAME, STATE BAR NUMBER AND ADDRESS):		<i>FOR COURT USE ONLY</i>	
EMAIL ADDRESS (Optional):		TELEPHONE NO.:	
ATTORNEY FOR (NAME):		FAX NO. (Optional):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA BARBARA			
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
ESTATE OF:			
HEARING DATE:	TIME:	DEPARTMENT:	
REPORT OF STATUS OF ADMINISTRATION (Probate Code § 12200 et seq.)			CASE NUMBER:

INFORMATION TO THE PERSONAL REPRESENTATIVE OF THE ESTATE: You must give notice of this Status Report using form DE-120, and must include the following statement in no less than 10 point **boldface** type: **YOU HAVE THE RIGHT TO PETITION FOR AN ACCOUNT UNDER SECTION 10950 OF THE CALIFORNIA PROBATE CODE.** (Prob. Code, § 12201.)

Petitioner (name): _____, as Personal Representative of the Estate of: _____ alleges:

1. Decedent (name): _____ died testate intestate on date: _____ in (place of death): _____ being a resident of the County of Santa Barbara, State of California, at the time of his or her death.

2. Decedents will dated: _____ and codicil(s) dated: _____ was/were admitted to probate by order of this court on (date petition was granted): _____ Petitioner qualified as personal representative and letters were issued to Petitioner on _____. At all times since then, Petitioner has been and now is the duly qualified personal representative of Decedent's estate.

3. A brief review of the status of the administration of the estate is as follows: _____

