

IN THE MATTER OF

Case No. _____

_____,
Ward/Minor Ward/Protected Person.

**CERTIFICATE OF MAILING
APPLICATION FOR
APPROVAL OF ACCOUNTING
AND/OR FEES**

I swear or affirm, under the penalties of perjury, that copies of the forms listed below were mailed to all interested persons (including government agencies providing benefits) and bonding company, if any, at the addresses set forth below on _____.

Application for Approval of Accounting and/or Fees ([CC 16:2.29](#))

Notice of hearing (received from the court after filing the Application)

**NAME(S) OF
INTERESTED PERSON(S)**

ADDRESS(ES)

_____	_____
_____	_____
_____	_____
_____	_____

See attached (more names and addresses than above)

Sign on next page.

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