

Name: Address: City: State: Zip Code: Telephone: Attorney for/Pro Per:	<i>FOR COURT USE ONLY</i>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SHASTA</b> MAILING ADDRESS: 1500 Court Street, Room 219 STREET ADDRESS: 1500 Court Street, Room 219 CITY AND ZIP CODE: Redding, CA 96001	
PEOPLE OF THE STATE OF CALIFORNIA  v.  DEFENDANT:	
<b>PROOF OF SERVICE</b>  <input type="checkbox"/> <b>Personal Service</b> <input type="checkbox"/> <b>Service by Mail</b>	Case Number:

1. Person serving: I am over the age of 18 and not a party to this action.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_

2. I served a copy of the Petition/Application for Resentencing or Reduction to Infraction as follows:  
(Choose one)

a. **Personal Service:** I personally delivered the Petition/Application for Resentencing or Reduction to Infraction to the person at the address listed below:

Name of person served: \_\_\_\_\_  
Address where served: \_\_\_\_\_  
Date Served: \_\_\_\_\_  
Time Served: \_\_\_\_\_  a  p.m.

b. **Service by Mail:** I deposited the Petition/Application for Resentencing or Reduction to Infraction in the United States mail, in a sealed envelope with first class postage fully prepaid. The envelope was addressed as follows:

Name of person served: \_\_\_\_\_  
Address: \_\_\_\_\_  
Date of Mailing: \_\_\_\_\_  
Place of Mailing (city and state): \_\_\_\_\_

I declare to the best of my information and belief that the foregoing is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Declarant)

\_\_\_\_\_  
(Printed Name of Declarant)