

PEOPLE OF THE STATE OF CALIFORNIA v. DEFENDANT:

CASE NUMBER:

2. REQUEST FOR RELIEFa. **RESENTENCING/DISMISSAL**

Petitioner is currently serving the sentence for the crime noted above, and requests the sentence be recalled and that he/she be resentenced or the charge be dismissed as required by law.

Other: _____

b. **REDESIGNATION/DISMISSAL/SEALING**

Applicant has completed the sentence for the crime noted above, and requests the sentence be recalled and the conviction be redesignated or dismissed. If the conviction is dismissed, applicant requests the court's record of conviction be sealed.

Other: _____

3. WAIVER OF HEARING BY ORIGINAL SENTENCING JUDGE

Petitioner/applicant waives the right to have this matter heard by the original sentencing judge. The Presiding Judge of the court may designate any judge to rule on this matter.

4. WAIVER OF APPEARANCE

Petitioner/applicant understands there is a right to personally attend any hearing held in this matter. Petitioner/applicant gives up that right; the matter may be heard without his/her appearance.

Dated: _____

Signature of petitioner/applicant

PEOPLE OF THE STATE OF CALIFORNIA v. DEFENDANT:

CASE NUMBER:

PROOF OF SERVICE

 Personal Service Service by Mail1. Person serving: I am over the age of 18 and not a party to this action.

(1) Name: _____
 (2) Address: _____
 (3) Telephone: _____

2. I served a copy of the Petition/Application for Resentencing or Reduction to Infraction as follows (*check one*): a. Personal Service: I personally delivered the Petition/Application for Resentencing or Reduction to Infraction to the person at the address listed below:

(1) Name of person served: _____
 (2) Address where served: _____
 (3) Date Served: _____
 (4) Time Served: _____ AM PM

 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:

(1) Name of person served: _____
 (2) Address: _____
 (3) Date of Mailing: _____
 (4) 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)