

ATTORNEY OR PARTY WITHOUT AN ATTORNEY (Name, State Bar number, and address): NAME: ADDRESS: CITY, STATE, ZIP: TELEPHONE NO: FAX NO. (Optional): EMAIL ADDRESS (Optional): ATTORNEY FOR (Name):	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA COUNTY OF SANTA CRUZ Santa Cruz Branch 701 Ocean Street, Room 120 Santa Cruz, CA 95060	
APPELLANT: vs. RESPONDENT:	
NOTICE OF PARKING APPEAL (California Vehicle Code § 40230)	CASE NUMBER:

Notice is hereby given that _____
 appeals the hearing examiner's decision with regard to Respondent agency's parking citation
 No. _____. The citation was issued on _____.
 A copy of the agency's final decision is attached.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

 (TYPE OR PRINT NAME)

 (SIGNATURE)