

APPELLANT (NAME AND ADDRESS):	TELEPHONE NO.:	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA BARBARA STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
ISSUING AGENCY (NAME AND ADDRESS):		
PROOF OF SERVICE NOTICE OF APPEAL - PARKING		CASE NUMBER:

PROOF OF SERVICE BY MAIL

I hereby certify that I have served a copy of the Notice of Appeal-Parking by enclosing a true copy in a sealed envelope addressed to the Issuing Agency whose address is listed below and by depositing the envelope in the United States mail with the Postage fully prepaid.

Date of Mailing: _____

City of Mailing: _____

Address of Issuing Agency:

Person Serving (name, address, telephone number):

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

Dated: _____

 type or print name

 Signature of Declarant

Insert Case Name:	CASE NUMBER:
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PROOF OF SERVICE – PERSONAL DELIVERY

I hereby certify that I have served the Notice of Appeal – Parking by personally delivering a copy to the Issuing Agency, whose agent for service is listed below.

Person served: _____, Authorized Agent for Service

Delivered on _____ at _____
(date) (time)

Address of Issuing Agency:

Person Serving (name, address, telephone number):

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

Dated: _____

type or print name

Signature of Declarant