SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF TRINITY

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):		FOR COURT USE ONLY
(Hame, State Bar Hamber, and data ess).		FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.:		
E-MAIL ADDRESS: ATTORNEY FOR (Name):		
PEOPLE OF THE STATE OF CALIFORNIA		
vs. DEFENDANT: DATE OF BIRT	TH:	
PETITION		
(Pen. Code, § 1170.18(a)) (Pen. Code, § 11	ION TO MISDEMEANOR 70.18(f))	
INSTRUCTIONS • Petitioner must complete Petition and indicate whether a request is made for	or Resentencing or Reduction to	
Misdemeanor.Upon filing, petitioner is required to immediately provide notice by provide	ing a copy of the Petition to the	
 District Attorney. The District Attorney is required to complete the Response, file with the coproviding a copy to the Petitioner. 	ourt, and provide notice by	GAGE MANADED
• If the petitioner is currently in County Jail or State Prison related to this car the petitioner is ineligible, or if either the petitioner or District Attorney received, the court will set a hearing and provide notice of the date, time, and District Attorney.	quests a hearing as provided	CASE NUMBER:
PETITIONER/CONVICTION INFORMATION		
On <i>(date)</i> , Petitioner, the defendant in the above-ent that have now been reclassified as misdemeanors <i>(specify a)</i>		
and was sentenced to (specify sentence imposed):		
Petitioner has no prior convictions for offenses under Pena pursuant to Penal Code § 290(c). Petitioner does not pose a § 1170.18(c).		
1. RESENTENCING		
Petitioner is currently serving the above sentence. Petiti resentenced to a misdemeanor under Penal Code § 1170		ny sentence be recalled and that Petitioner be
Petitioner is currently being held in County Jail or State Prison (court will set a hearing).		
2. REDUCTION TO MISDEMEANOR		
Petitioner has completed the above sentence. Petitioner misdemeanors under Penal Code § 1170.18(f), (g).	requests that the eligible fe	elony convictions listed above be reduced to
Although a hearing is not necessary, I request a <i>this determination</i>)	hearing for this determinat	tion. (check only if you want a hearing for
I declare under penalty of perjury and to the best of my information	ation and belief that the for	egoing is true and correct.
Executed on:	>	
(DATE)	(SIGNATUR	E OF PETITIONER OR ATTORNEY)
(ADDRESS, PETITIONER)	(CITY)	(STATE) (ZIP CODE)