## SUPERIOR COURT OF CALIFORNIA, COUNTY OF MENDOCINO

## **DECLARATION AND REQUEST FOR RECONSIDERATION OF CLERK DETERMINATION**

NAME				FOR COURT USE ONLY
ADDRESS				
CITY	STATE		ZIP CODE	
DATE OF BIRTH	DRIVER L	DRIVER LICENSE NUMBER		
CASE OR CITATION NUMBER				
This form must be comple				e Court. All supporting  E FINAL and will be mailed to you.
documentation must be at	tached. THE JUDGE	E 3 DECISI	ON WILL BE	FINAL and will be mailed to you.
Previously, the clerk denie	ed my request for rel	lief througl	n the MyCita	ntions Ability to Pay program:
				ased on additional information and
supporting documentation	1 I now provide to the	e court. (p	lease attacl	h additional pages if needed)
I declare under penalty of pe	erjury that the foregoin	ng is true ar	nd correct.	
Date	_	Defendant's Signature		