## SUPERIOR COURT OF CALIFORNIA, COUNTY OF MENDOCINO DECLARATION AND REQUEST FOR RECONSIDERATION OF JUDICIAL DECISION

NAME				FOR COURT USE ONLY
ADDRESS				
CITY		STATE	ZIP CODE	
DATE OF BIRTH		DRIVER LICENSE	NUMBER	
CASE OR CITATION NUMBER				
This form must be complet documentation must be att				Court. All supporting FINAL and will be mailed to you.
Previously, the court denie	ed my reque	st for relief, su	ıbmitted on	// on the following form:
Request for Infraction Res	solution Alter	rnatives (MTR-	200)	
Declaration and Request	for Relief on	Infraction (MTI	R-180)	
Request for Sentence Mo	odification (M	TR-210)		
l did not present all relevar	nt facts and	documentatio	n to the court at	the time of my initial request.
I request judicial review an	nd reconside	eration of the p	orior decision, ba	sed on additional information and additional pages if needed)
I declare under penalty of pe	rjury that the	foregoing is tru	ue and correct.	
Date			Defendant's Signa	ature