Application submitted by: (Name and Address) Name: _____ Street Address: _____ City, State, Zip Code: _____ Telephone No. _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MENDOCINO Street Address: 100 North State Street City and Zip Code: Ukiah, CA 95482 Branch Name: SITTING AS THE JUVENILE COURT	
Child's Name:	
DECLARATION: INFORMAL EXCHANGE OF JUVENILE RECORDS (W&I 827, Rule of Court 5.552)	CASE NUMBER:

I, _____, do hereby declare:

1. That I am a person described in Superior Court of California, County of Mendocino, local rule 5.8(c)(2)(a), specifically,

   _____

2. That I am requesting to view and copy juvenile records, as described on the attached page, concerning the above-named child/minor currently in the possession of the:

   Juvenile Court Probation Dept. Dept. of Social Services Court-Appointed Special Advocate Family Court Services

3. That I certify that I am requesting these records for use in my official capacity and that I will not disseminate any portion of the records released to me or information relating to their contents, other than to other persons or agencies described in S.O. 99-021 and that no portion of those records and no information relating to the contents of those records shall be made attachments to any other documents without the prior approval of the presiding judge of the juvenile court, unless they are used in connection with and in the course of a criminal investigation or a proceeding brought to declare a person a dependent child or ward of the juvenile court.

I declare under penalty of perjury that the above is true and correct.

Executed this _____ Day of _____ in Ukiah, California.

Signature: _____