		TR-205	
	NAME OF COURT:	FOR COURT USE ONLY	
	STREET ADDRESS:		
	MAILING ADDRESS:		
	CITY AND ZIP CODE:		
	BRANCH NAME:	<del>- </del>	
	PEOPLE OF THE STATE OF CALIFORNIA  vs.		
	DEFENDANT:		
	REQUEST FOR TRIAL BY WRITTEN DECLARATION (Vehicle Code, § 40902)		
	TO BE FILLED OUT BY COURT CLERK	CITATION NUMBER:	
_	A. DUE DATE (for receipt of this form and any unpaid bail) (specify):	CASE NUMBER:	
В.	Bail amount required: \$		
C.	Bail amount already deposited by defendant: \$		
D.	Date mailed or delivered by clerk:		
E.	Mail or deliver completed form, evidence, and mail to the Clerk of the (specify):	Court at (mailing address):	
	REQUEST FOR TRIAL		
1.	I have reviewed the Instructions to Defendant (Trial by Written Declaration) (form TR-	200).	
2.	I request to have a trial by written declaration.		
3.	The facts contained in the Declaration of Facts on the reverse are personally known to	o me and are true and correct.	
4.	I know that I have the right not to be compelled to be a witness against myself. I understatement, I am giving up and waiving that right and privilege.	erstand and agree that by making any	
5.	5. EVIDENCE The following evidence supports my case and includes everything I want the court to consider in deciding my case:  a.  photographs (specify total number):  b.  medical record  c.  registration documents  d.  inspection certificate  e.  diagram  f.  car repair receipt  insurance documents  other (specify):		

(Declaration continued on reverse)

PEOPLE v. DEFENDANT (Name):	CASE NUMBER:	
DECLARATION OF FACTS (Type or print only. State what happened and explain all the items of evidence you checked in item 5 on the reverse and tell how they support your case. You may add additional pages.)  (Name):  (Current mailing address):		
STATEMENT OF FACTS (begin here):		
7. Number of pages attached:		
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.		
Date:		
<b>k</b>		
(TYPE OR PRINT NAME)	(SIGNATURE)	