ATTORNEY OR PARTY WITHOUT ATTORNEY (Name & Address):		FOR COURT USE ONLY
Telephone No.: E-Mail Address (Optional):	Fax No. (Optional):	
ATTORNEY FOR (Name):	Bar No:	
SUPERIOR COURT OF CALIF ÔIVIL DIVISION: 1200 Aguajito Road, Monterey, CA	ORNIA, COUNTY OF MONTEREY	
ÁPPELLANT:	· · ·	
RESPONDENT:		
	APPEAL - CIVIL CITATION	CASE NO:
Civil Citation fine/penalty	□ has been paid. □ has been wa	aived by the citing agency.
having exhausted the administration from the final decision of the administration of the administration of the administration of the second seco	tive review process, hereby appeals to the	, of the above entitled action, e Superior Court of California, County of Monter ersonally served on,
declare under penalty of periury	vunder the laws of the State of California	that the foregoing is true and correct
Date:		
TYPE OR PRINT NAME)		(SIGNATURE OF APPELLANT OR ATTORNEY
	be filed for each civil citation. A copy of th beal with proof of service must be filed with	
	PROOF OF SERVICE BY MA	AIL
	of Appeal in the United States mail, in a s ws: (Name and address of citing agency)	ealed envelope with postage fully prepaid. The
Date of mailing:	Place of mailing (city and state):
): was mailed. My residence or business address :ity:State:
declare under penalty of perjury	under the laws of the State of California	that the foregoing is true and correct.
Date:		
(TYPE OR PRINT NAME)		(SIGNATURE OF DECLARANT
Approved for Optional Use CI-143 (New, October 2017)	NOTICE OF APPEAL - CIVIL CITA	FION Monterey County Superior Court Govt. Code § 53069.4