

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO <input type="checkbox"/> CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 <input type="checkbox"/> EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020-3941 <input type="checkbox"/> NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081-6695 <input type="checkbox"/> SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910-5649	
PEOPLE OF THE STATE OF CALIFORNIA <p style="text-align: center;">VS</p>	PLAINTIFF CRIMINAL CASE NUMBER
DECLARATION RE AND ORDER RELEASING PROBATION REPORT TO ATTORNEYS OF RECORD (PC 1203.05)	DEFENDANT(S) DA

The undersigned certifies that he/she is currently Attorney of Record for the above-named defendant in a California criminal proceeding, to wit, case # _____,

pending in the following court: _____.

The Clerk of the Superior Court is requested to release to me, or my designee, _____, copies of the reports of the Probation Officer in the above-entitled case(s).

I request copies of the probation reports in the following case(s) for the above-named defendant, for which I am not the Attorney of Record: _____.

Date: _____

Attorney

It is so ordered.

Date _____

Judge of the Superior Court