

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO.(Optional): _____ EMAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO <input type="checkbox"/> CENTRAL DIVISION, SMALL CLAIMS, 330 W. BROADWAY, ROOM 241, SAN DIEGO, CA 92101 <input type="checkbox"/> CENTRAL DIVISION, CIVIL, 330 W. BROADWAY, ROOM 225, SAN DIEGO, CA 92101 <input type="checkbox"/> NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081	
PLAINTIFF(S)	
DEFENDANT(S)	
REQUEST FOR CLERK'S CERTIFICATE RE: COSTS AND CERTIFICATION	CASE NUMBER _____

REQUEST TO ISSUE

A Writ of Execution in this case was issued on _____. Pursuant to Code Civ. Proc. § 685.090, a subsequent Memorandum of Costs was filed on _____ claiming additional **COSTS** in the amount of \$ _____. The time allowed to tax additional costs has expired without a motion being filed.

Based on the aforementioned, I request a Clerk's Certificate Re: Costs be issued.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

Signature of Declarant

CLERK'S CERTIFICATE RE: COSTS

TO THE SHERIFF OR LEVYING OFFICER OF **SAN DIEGO** _____ **COUNTY:**

In accordance with Code Civ. Proc. § 685.090, I hereby certify that additional **COSTS** in the amount of \$ _____ are added to the judgment in the above-mentioned case.

Clerk of Superior Court

Date: _____

by _____, Deputy

CLERK'S CERTIFICATE



The foregoing document, consisting of ____ page(s), is a full, true, and correct copy of the
 original copy on file in this office.

Clerk of Superior Court

Date: _____

by _____, Deputy