

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"/> COUNTY COURTHOUSE, 220 W. BROADWAY, SAN DIEGO, CA 92101-3814 <input type="checkbox"/> NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081-6695 <input type="checkbox"/> EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020-3941 <input type="checkbox"/> SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910-5649	
PEOPLE OF THE STATE OF CALIFORNIA <div style="text-align: center;">VS</div>	PLAINTIFF CRIMINAL CASE NUMBER
DEFENDANT(S)	
DECLARATION RE AND ORDER RELEASING PROBATION REPORT TO ATTORNEYS OF RECORD (PC 1203.05)	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