ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, address and telephone #):*	***FOR COURT USE ONLY***
STATE BAR NO: ATTORNEY FOR *(Name)**:***	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MARIN 3501 Civic Center Drive P.O. Box 4988 San Rafael, CA 94913-4988	
APPELLANT: NAME: _____ ADDRESS: _____ _____ SSN: _____ - _____ - _____ DLN: _____ ISSUING AGENCY: _____	
NOTICE OF DECISION **FOLLOWING DE NOVO HEARING ON PARKING APPEAL**	CASE NUMBER:

The above-entitled matter having been heard de novo, the Court finds the above appellant in this case parking citation number _____, final administrative decision rendered on _____ is hereby:

- ❒ LIABLE — Appellant to recover nothing.
- ❒ LIABLE — Judgment in the amount of $_____.
- ❒ NOT LIABLE — Appellant to recover deposit of parking penalty and filing fee from the issuing agency (Vehicle Code § 40230).

Date: _____

_____
JUDICIAL OFFICER

DECLARATION OF PERSONAL SERVICE/SERVICE BY MAIL
(Code of Civil Procedure Sections 1013a and 2015.5)

I, the undersigned, under penalty of perjury, declare that I am over 18 years of age, a citizen of the United States, an employee of the Marin County Superior Court and not a party to the action. I served this *Notice of Decision on Parking Appeal* by ❒ Personal Service, or ❒ Service by Mail by placing true copies thereof, enclosed in a separate envelope, with postage fully prepaid, in the United States Post Office mail box, at San Rafael, Marin County, California, on the date written herein, addressed to the parties indicated below.

APPELLANT: _____

ISSUING AGENCY: _____

Executed at San Rafael, California

KIM TURNER
Court Executive Officer

Date: _____

By: _____
DEPUTY