CR-416

Proof of Service—Sex Offender **Registration Termination** (Pen. Code, § 290.5)

	Clerk stamps date here when form is filed.
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Instructions

This form is for providing proof that a copy of a filed Petition to Terminate Sex Offender Registration (form CR-415) and proof of current registration was served (delivered) to the required law enforcement agencies and district attorney's offices. Read Information on Filing a Petition to Terminate Sex Offender Registration (form CR-415-INFO) for more information.

The person who serves (delivers) a document or form in this case and who fills out this form must be at least 18 years old.

- This form is for proof of service by mail or personal delivery. For proof of electronic service, read and follow rule 2.251 of the California Rules of Court, and use *Proof of Electronic Service* (form POS-050/EFS-050).
- File a completed form with the court. Keep a copy of this form for your records.

1)	At the time I served the Petition to Terminate Sex Offender Registration
	(form CR-415) and proof of current registration, I was at least 18 years
	old.
2)	My name is:

Fill in court name and street address:	
Superior Court of California, County	of

Fill in case number:	
Case Number:	

J	8			
Street		City	State	Zip

I served copies of the Petition to Terminate Sex Offender Registration and proof of current registration filed (check for myself on behalf of *(name of petitioner)*:

I mailed or personally delivered a filed-stamped copy of Petition to Terminate Sex Offender Registration (form CR-415) and proof of current registration to the agencies listed below:

y

Name of agency:

at the address above.

My mailing address is:

Address:			
Street	City	\overline{State} \overline{Zip}	
Date of service:			
Method of service <i>(check one)</i> :			
☐ Mailed the documents to the agen	cy at the address above i	n a sealed envelope from	
(city, state):	by deposit	ing the envelope with the U.S. Po	stal Service
Delivered in person to <i>(name)</i> :		at (time):	

b. District attorney (county of registration):

County of:			
Address:			
Street	<u>City</u>	State Zip	
Date of service:			
Method of service (check one):			
☐ Mailed the documents to the district att	corney's office at the	address above in a sealed enve	elope from
(city, state):	by depositi	ng the envelope with the U.S. I	Postal Service o
☐ Delivered in person to <i>(name)</i> :		at (time):	
at the address above.			

	Name of agency:Address:			
	Address: Street	City	State Zip	
	Date of service:			
	Method of service (check one):			
	☐ Mailed the documents to the agency a		*	
	(city, state):			
	☐ Delivered in person to <i>(name)</i> : at the address above.		at (time):	
d.	☐ District attorney (county of conviction		,	
	County of:Address:			
	Address: Street		State Zip	
	Date of service:		-	
	Method of service <i>(check one)</i> :			
	☐ Mailed the documents to the district at	ttorney's office at the	address above in a sealed envelop	e from
	(city, state):	by depositi	ng the envelope with the U.S. Post	al Servic
	Delivered in person to <i>(name)</i> : at the address above.		at (time):	
	☐ Check here if you served copies of the petition and proof of current registration to additional law enforcement agencies and district attorney's offices. Attach a separate page listing the names, addresses, date of service, and method of service of each additional copy you served. Write "CR-416, Item 4" on the top of the page.			
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I de			information above is true and corr	ect.

Case Number: