		TR-205	
	NAME OF COURT:	FOR COURT USE ONLY	
	STREET ADDRESS:		
	MAILING ADDRESS:		
	CITY AND ZIP CODE:		
	BRANCH NAME:		
	PEOPLE OF THE STATE OF CALIFORNIA  VS.		
	DEFENDANT:		
	REQUEST FOR TRIAL BY WRITTEN DECLARATION (Vehicle Code, § 40902)		
	TO BE FILLED OUT BY COURT CLERK	CITATION NUMBER:	
		CASE NUMBER:	
′	A. DUE DATE (for receipt of this form and any unpaid bail) (specify):		
В.	Bail amount required: \$		
C.	Bail amount already deposited by defendant: \$		
D.	Date mailed or delivered by clerk:		
E.	Mail or deliver completed form, evidence, and mail to the Clerk of the (specify):	Court at (mailing address):	
	REQUEST FOR TRIAL		
1.	I have reviewed the Instructions to Defendant (Trial by Written Declaration) (form TR-	200).	
2.	I request to have a trial by written declaration.		
3.	3. The facts contained in the Declaration of Facts on the reverse are personally known to me and are true and correct.		
4.	<ol> <li>I know that I have the right not to be compelled to be a witness against myself. I understand and agree that by making any statement, I am giving up and waiving that right and privilege.</li> </ol>		
5.	EVIDENCE The following evidence supports my case and includes everything I wan a.  photographs (specify total number):  e.  diagram b.  medical record f.  car repair receip c.  registration documents g.  insurance documents d.  inspection certificate h.  other (specify):	t	

(Declaration continued on reverse)

PEOPLE v. DEFENDANT (Name):	CASE NUMBER:
· <del>-</del>	
<ol> <li>DECLARATION OF FACTS (Type or print only. State what happened and explain all on the reverse and tell how they support your case. You may add additional pages.) (Name): (Current mailing address):</li> </ol>	the items of evidence you checked in item 5
STATEMENT OF FACTS (begin here):	
7. Number of pages attached:	
I declare under penalty of perjury under the laws of the State of California that the foregoin	g is true and correct.
Date:	
<b>L</b>	
(TYPE OR PRINT NAME)	(SIGNATURE)