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Attorney or Party without attorney (Name and Address) Telephone No.: Attorney for:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SHASTA Mailing Address Street Address 1500 Court Street, Room 319 Redding, CA 96001 Branch Name: Redding	
AGENCY/RESPONDENT CONTESTANT/APPELLANT	
NOTICE OF APPEAL – PARKING (Limited Civil Case)	Court Case Number:

The undersigned Contestant/Appellant hereby appeals to the Superior Court of California, County of Shasta, from the final Administrative Decision dated _____ on Parking Citation Number_____.

Dated: _____ _____ _____
(type or print name) (Signature of Contestant/Appellant)

Notice to Contestant/Appellant:
A separate appeal is required for each citation. A copy of this document must be mailed to the processing agency. The original Notice of Appeal must be filed with the Court within 30 days after personal delivery or within 35 days after mailing (Code Civ. Proc. §1013) of the processing agency's final decision to the contestant. The Court may not proceed on your appeal if service has not been made.

PROOF OF SERVICE BY MAIL

I deposited a copy of this Notice of Appeal in the United States mail, in a sealed envelope with first–class postage fully prepaid. The envelope was addressed as follows *(name and address of processing agency):*

Date of mailing: _____ Place of mailing *(city and state):* _____
I am a resident of or employed in the county where the Notice of Appeal was mailed. My residence or business address is: _____

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)