

INSTRUCTIONS FOR SEALING JUVENILE RECORDS

Completely fill out the Petition for Sealing Juvenile Records. If you do not know or do not remember your case number, contact the Glenn County Probation Department at 530-934-6416 and press "0". The case number must be on all documents. If the matter was dealt with informally through the Probation Department and you did not go to Court, there will be no case number.

You must list all law enforcement agencies who were involved and have records of any of your cases you wish to be sealed. This would include the D.A., Probation Department, the attorney you had at the time, Department of Justice, etc. If you do not know which agencies to list, contact the Glenn County Probation Department as indicated above.

You must have a total of 4 copies of the Petition. The original for the Court, one for the D.A., one for Probation and one for your records.

The top portion of the Order must also be filled out which includes your name, address, Court address, case name and case number. Numbers 1 through 5 must be completed. Also check the box indicated in Number 7. This form will be submitted to the Court and a copy will be returned to you if the Judge grants the Order.

When the paperwork is submitted to the Superior Court for filing, a hearing before a Judge will be scheduled within two to four weeks. You will receive a notice in the mail, notifying you of your Court date. If you do not receive a notice in the mail within four weeks, call the Clerk's office at 530-934-6446, ex. 7004.

ADDITIONAL INFORMATION

How can I make sure that my rap sheet shows that my records are sealed?

In order to make sure that the police, sheriff, and other agencies seal your records, you should request a copy of your juvenile records.

For FBI records:

Send your name, address, date of birth, a set of fingerprint, and the appropriate fee to:
Criminal Justice Information Services
SCUMOD D2
1000 Custer Hollow Road
Clarksburg, West Virginia 26306

For California Records:

Send your name, address, reason for requesting your records, fingerprints (fingerprint services are in the yellow pages and generally charge about \$10 for the service), and the appropriate fee to:
California Department of Justice
P.O. Box 903417
Sacramento, CA 94203-4170
Attn: Records Review Unit

For local police records, check with your local police department.

SUPERIOR COURT OF CALIFORNIA COUNTY OF GLENN

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Sealing Juvenile Records

LEGAL PROCESS CLERKS ARE PROHIBITED BY LAW FROM RENDERING ASSISTANCE OR ADVICE IN COURT PROCEEDINGS (GOVERNMENT CODE SECTION 6125). PERSONS APPEARING ON THEIR OWN BEHALF (IN PROPRIA PERSONA) ARE RESPONSIBLE FOR PREPARING AND PRESENTING THEIR PLEADINGS IN COMPLETE AND PROPER FORM WITHOUT LEGAL ASSISTANCE FROM THE CLERKS OF THE COURT. THE CLERKS CANNOT TELL YOU WHAT TO WRITE TO COMPLETE LEGAL FORMS OR DOCUMENTS. AN ATTORNEY SHOULD ANSWER QUESTIONS THAT PERTAIN TO LEGAL MATTERS AND PROPER COMPLETION OF THE APPROPRIATE FORMS.

INFORMATION AND ASSISTANCE IS AVAILABLE THROUGH THE FOLLOWING:

**Glenn Court Self Help Center
119 N. Butte Street
Willows, CA 95988
(530) 934-7114
Please call for an appointment**

COMPLETION OF FORMS

- DOCUMENTS SHALL CONFORM TO THE STATE AND LOCAL RULES OF COURT
- ALL DOCUMENTS PRESENTED FOR FILING SHALL:
 - BE TWO-HOLE PUNCHED AT THE TOP OF THE PAGE
 - INCLUDE AN ORIGINAL AND 2 COPIES
 - SELF-ADRESSED, STAMPED ENVELOPE PROVIDED FOR ANY COPIES THAT NEED TO BE RETURNED BY MAIL
- DOCUMENTS SHALL BE SUBMITTED TO THE CLERK'S OFFICE AT LEAST 2 DAYS PRIOR TO THE HEARING.

There will be a .50 per page charge for copies made by the Clerk's Office or the Self Help Center

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i> TELEPHONE NO.: _____ FAX NO. <i>(Optional):</i> _____ E-MAIL ADDRESS <i>(Optional):</i> _____ ATTORNEY FOR <i>(Name):</i> _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
CASE NAME:	
ORDER TO SEAL JUVENILE RECORDS	CASE NUMBER:

1. Name of petitioner *(specify aliases):* _____ Date of birth: _____
 2. a. Date of hearing: _____ Dept.: _____ Room: _____
 b. Judicial officer (name): _____

3. The court has read and considered the petition and the report of the probation officer.

4. The petition is
 a. Granted. _____ b. Denied

THE COURT ORDERS

5. The sealing of petitioner's juvenile records in the custody of this court and the courts, agencies, and officials named below *(designate county):*

See attachment (A) for additional names.

All records sealed shall be destroyed according to Welfare and Institutions Code sections 389(c) and 781(d).

6. Petitioner is relieved from the registration requirements under Penal Code section 290 and the registration information in the custody of the Department of Justice and other agencies and officials listed above shall be destroyed.

7. The clerk shall send a certified copy of this order to the clerk in each county in which a record is ordered sealed, and a copy to each agency and official listed above.

Date: _____ _____
JUDICIAL OFFICER OF THE SUPERIOR COURT

CLERK'S CERTIFICATE

[SEAL]

I certify that the foregoing is a true and correct copy of the original on file in my office.

Date: _____ Clerk, by _____, Deputy

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address) Telephone No:	
ATTORNEY FOR: (Name)	
Name of Court: Glenn County Superior Court Mailing Address: 526 West Sycamore Street Hearing Address: Same City & Zip Code: Willows, 95988	

PETITION FOR SEALING JUVENILE RECORDS (Welfare & Institutions Code 781)	CASE NUMBER:
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Age of Minor: _____

Date of Birth: _____

Petitioner in the above-entitled matter hereby alleges:

The Petitioner is now 18 years of age or older **OR** a period in excess of five years has elapsed since termination of jurisdiction by the Court.

Since the termination of said jurisdiction, Petitioner has not been convicted of a felony or any misdemeanor involving moral turpitude and that rehabilitation has been attained.

There is [] [] is not a pending civil litigation case arising out of the act that brought this matter before the Court.

Hereto is a list of the Juvenile Court Probation Departments, and other agencies, including law enforcement and public officials, who may have records of arrest or other information concerning the juvenile record of the Petitioner.

- Glenn County District Attorney
- Glenn County Probation Department
- Department of Justice
- Willows Police Department
- Orland Police Department
- Glenn County Sheriff Department
- Department of Motor Vehicles

Wherefore, Petitioner prays that this Court conducting this hearing pursuant to Welfare and Institutions Code 781 thereon orders all records, papers and exhibits in Petitioner's case be sealed.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on _____ at _____, California

(Signature)

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name, State Bar number, and address):</i> <hr style="width:10%; margin-left:0;"/> TELEPHONE NO.: _____ FAX NO. <i>(Optional):</i> _____ E-MAIL ADDRESS <i>(Optional):</i> _____ ATTORNEY FOR <i>(Name):</i> _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER:
<p style="text-align: center;">PROOF OF SERVICE—CIVIL</p> Check method of service (only one): <input type="checkbox"/> By Personal Service <input type="checkbox"/> By Mail <input type="checkbox"/> By Overnight Delivery <input type="checkbox"/> By Messenger Service <input type="checkbox"/> By Fax <input type="checkbox"/> By Electronic Service	JUDGE: DEPT.:

(Do not use this proof of service to show service of a Summons and complaint.)

1. At the time of service I was over 18 years of age and **not a party to this action.**
2. My residence or business address is:

3. The fax number or electronic notification address from which I served the documents is *(complete if service was by fax or electronic service):*
4. On *(date):* _____ I served the following **documents** *(specify):*

The documents are listed in the *Attachment to Proof of Service—Civil (Documents Served)* (form POS-040(D)).

5. I served the documents on the **person or persons** below, as follows:
 - a. Name of person served:
 - b. *(Complete if service was by personal service, mail, overnight delivery, or messenger service.)*
 Business or residential address where person was served:

 - c. *(Complete if service was by fax or electronic service.)*
 (1) Fax number or electronic notification address where person was served:

(2) Time of service:

The names, addresses, and other applicable information about persons served is on the *Attachment to Proof of Service—Civil (Persons Served)* (form POS-040(P)).

6. The documents were served by the following means *(specify):*
 - a. **By personal service.** I personally delivered the documents to the persons at the addresses listed in item 5. (1) For a party represented by an attorney, delivery was made to the attorney or at the attorney's office by leaving the documents, in an envelope or package clearly labeled to identify the attorney being served, with a receptionist or an individual in charge of the office, between the hours of nine in the morning and five in the evening. (2) For a party, delivery was made to the party or by leaving the documents at the party's residence with some person not younger than 18 years of age between the hours of eight in the morning and six in the evening.

(Continued on next page)

CASE NAME	CASE NUMBER:
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6. b. **By United States mail.** I enclosed the documents in a sealed envelope or package addressed to the persons at the addresses in item 5 and *(specify one)*:
- (1) deposited the sealed envelope with the United States Postal Service, with the postage fully prepaid.
 - (2) placed the envelope for collection and mailing, following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service, in a sealed envelope with postage fully prepaid.
- I am a resident or employed in the county where the mailing occurred. The envelope or package was placed in the mail at *(city and state)*:
- c. **By overnight delivery.** I enclosed the documents in an envelope or package provided by an overnight delivery carrier and addressed to the persons at the addresses in item 5. I placed the envelope or package for collection and overnight delivery at an office or a regularly utilized drop box of the overnight delivery carrier.
- d. **By messenger service.** I served the documents by placing them in an envelope or package addressed to the persons at the addresses listed in item 5 and providing them to a professional messenger service for service. *(A declaration by the messenger must accompany this Proof of Service or be contained in the Declaration of Messenger below.)*
- e. **By fax transmission.** Based on an agreement of the parties to accept service by fax transmission, I faxed the documents to the persons at the fax numbers listed in item 5. No error was reported by the fax machine that I used. A copy of the record of the fax transmission, which I printed out, is attached.
- f. **By electronic service.** Based on a court order or an agreement of the parties to accept service by electronic transmission, I caused the documents to be sent to the persons at the electronic notification addresses listed in item 5.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(TYPE OR PRINT NAME OF DECLARANT)

▶ _____
(SIGNATURE OF DECLARANT)

(If item 6d above is checked, the declaration below must be completed or a separate declaration from a messenger must be attached.)

DECLARATION OF MESSENGER

- By personal service.** I personally delivered the envelope or package received from the declarant above to the persons at the addresses listed in item 5. (1) For a party represented by an attorney, delivery was made to the attorney or at the attorney's office by leaving the documents in an envelope or package, which was clearly labeled to identify the attorney being served, with a receptionist or an individual in charge of the office, between the hours of nine in the morning and five in the evening. (2) For a party, delivery was made to the party or by leaving the documents at the party's residence with some person not younger than 18 years of age between the hours of eight in the morning and six in the evening.

At the time of service, I was over 18 years of age. I am not a party to the above-referenced legal proceeding.

I served the envelope or package, as stated above, on *(date)*:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

(NAME OF DECLARANT)

▶ _____
(SIGNATURE OF DECLARANT)

INFORMATION SHEET FOR PROOF OF SERVICE—CIVIL

(This information sheet is not part of the official proof of service form and does not need to be copied, served, or filed.)

USE OF THIS FORM

Note: This proof of service form should **not** be used to show proof of service of a summons and complaint. For that purpose, use *Proof of Service of Summons* (form POS-010).

This form is designed to be used to show proof of service of documents by (1) personal service, (2) mail, (3) overnight delivery, (4) messenger service, (5) fax, or (6) electronic transmission.

Certain documents must be personally served. For example, an order to show cause and temporary restraining order generally must be served by personal delivery. You must determine whether a document must be personally delivered or can be served by mail or another method.

GENERAL INSTRUCTIONS

A person must be over 18 years of age to serve the documents. The person who served the documents must complete the Proof of Service. **A party to the action cannot serve the documents.**

The Proof of Service should be typed or printed. If you have Internet access, a fillable version of this proof of service form is available at www.courtinfo.ca.gov/forms.

Complete the top section of the proof of service form as follows:

First box, left side: In this box print the name, address, and telephone number of the person *for* whom you served the documents.

Second box, left side: Print the name of the county in which the legal action is filed and the court's address in this box. The address for the court should be the same as the address on the documents that you served.

Third box, left side: Print the names of the plaintiff/petitioner and defendant/respondent in this box. Use the same names as are on the documents that you served.

Fourth box, left side: Check the method of service that was used. You should check only one method of service and should show proof of only one method on the form. If you served a party by several methods, use a separate form to show each method of service.

First box, top of form, right side: Leave this box blank for the court's use.

Second box, right side: Print the case number in this box. The case number should be the same as the case number on the documents that you served.

Third box, right side: State the judge and department assigned to the case, if known.

Complete items 1–6:

1. You are stating that you are over the age of 18 and that you are not a party to this action.
2. Print your home or business address.
3. If service was by fax service or electronic service, print the fax number or electronic notification address from which service was made.
4. List each document that you served. If you need more space, check the box in item 4, complete the *Attachment to Proof of Service—Civil (Documents Served)* (form POS-040(D)), and attach it to form POS-040.
5. Provide the names, addresses, and other applicable information about the persons served. If more than one person was served, check the box on item 5, complete the *Attachment to Proof of Service—Civil (Persons Served)* (form POS-040(P)), and attach it to form POS-040.
6. Check the box before the method of service that was used, and provide any additional information that is required. The law may require that documents be served in a particular manner (such as by personal delivery) for certain purposes. Service by fax or electronic transmission generally requires the prior agreement of the parties.

You must sign and date the proof of service form. By signing, you are stating under penalty of perjury that the information that you have provided on form POS-040 is true and correct.

**GLENN COUNTY SUPERIOR COURT
JUVENILE DIVISION
526 W. SYCAMORE STREET
WILLOWS, CA 95988
(530) 934-6446**

TO: Department of Motor Vehicles
Records Security and Identification Unit
Mail Station G-210
P.O. Box 942890
Sacramento, CA 94290-0001

September 5, 2014

RE: Adrian Reynoso, a minor.
Case No. 11JQ00501 – Date of Birth 08/03/1994

Pursuant to Section 781 of the Welfare and Institutions Code, all records, papers and exhibits in the above-entitled matter are hereby ordered sealed. Please see copy of Order to Seal Records attached.

Please verify that your agency has complied with this Order by returning this cover sheet to the address listed above.

Record Sealed: _____ Dated: _____

