

SUPERIOR COURT OF CALIFORNIA, COUNTY OF CALAVERAS

891 Mountain Ranch Road, San Andreas, CA 95249

Telephone: (209) 754-9800; Web: www.calaveras.courts.ca.gov

Applicant: (Name and Mailing Address) MUST BE LEGIBLE Telephone No. () -	<i>(For Court Use Only)</i>
People of the State of California vs. Defendant (insert name)	Case No: AFFIDAVIT FOR ELIGIBILITY/AMNESTY PROGRAM (Vehicle Code Section 42008.7) January 1, 2012 to June 30, 2012

I _____, declare under penalty of perjury and the Laws of the State of California that the following statements are true and correct to the best of my knowledge:

- (1) I do not owe victim restitution on any case within the county.
- (2) I do not have any outstanding (misdemeanor or felony) warrants within the county.

I understand the following:

- (1) My case will be verified for eligibility.
- (2) If my case is determined to be ineligible for amnesty, I will be notified within ten (10) court days.
- (3) If my case is determined to be ineligible for amnesty due to victim restitution owed on a case, any payment made today will be applied to outstanding victim restitution. Any remaining revenue may be applied to the amnesty case.
- (4) I understand that I am responsible for paying the remaining balance on any amnesty ineligible case.

Executed at: _____ on _____
County Date

Signature: _____