

Declaration submitted by: Name: Agency: Street Address: City, State: Telephone Number:	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF MERCED JUVENILE DIVISION	
Department: Juvenile Delinquency Street Address: 2840 W. Sandy Mush City & Zip Code: Merced, CA 95340	
NAME OF MINOR:	
RESPONSE BY DISTRICT ATTORNEY TO PETITION TO TERMINATE SEX OFFENDER REGISTRATION--JUVENILE	CASE NUMBER:

1. Petitioner's Information

This is a response to a petition filed by:

- a. Name: _____
Last First Middle
- Date of Birth: _____ (MM/DD/YYYY)
- CSAR Petition Number: _____
- b. Tier (check one): Tier 1 – 5 years Tier 2 – 10 years

2. Response

- a. The district attorney has no objection to this petition.
- b. The district attorney objects to granting the petition and requests a hearing because (check all that apply):
- (1) Community safety would be significantly enhanced by petitioner's continued registration.
- (2) Petitioner has not met the requirements of Penal Code section 290(e)/290.5(a)(2).
- c. The district attorney requests the petition be summarily denied because (check all that apply and state reasons for summary denial):
- (1) Petitioner has not fulfilled the filing and service requirements of Penal Code section 290.5 because: _____
- (2) There are pending charges against petitioner which could extend the time to complete the registration requirements of the tier or change petitioner's tier status. (Provide Court and Case information): _____
- Petitioner is in custody on parole on probation on supervised release:
- (3) Petitioner has not met the mandatory minimum registration period for their tier.
- (4) Other: _____
- d. This response has been served on the petitioner or counsel at the address set forth on the petition.

Date: _____

 Printed name of district attorney /
 district attorney's representative

 Signature of district attorney /
 district attorney's representative