

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address)	<i>(COURT USE ONLY)</i>
Telephone No.: Attorney for (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN BERNARDINO <i>Street Address</i> <i>Mailing Address: (Same as Above)</i> <i>City and Zip Code:</i> <i>Branch Name: Juvenile Delinquency Court</i>	
PLAINTIFF: PEOPLE OF THE STATE OF CALIFORNIA	
CASE NAME:	CASE NUMBER:
RESPONSE TO PETITION FOR RESENTENCING (JUVENILE) (PC 1170.18)	

District Attorney's Response:

1. The petitioner is not entitled to the relief requested. Reason:
- a. The petitioner poses an unreasonable risk of danger to public safety.
- b. A hearing should be held to determine: _____

A hearing on this *Petition for Resentencing* will be held as follows:

on (*date*): _____ at (*time*): _____ in Dept.: _____

located at the following Juvenile Court:

900 East Gilbert Street, Bldg. 35, San Bernardino, Ca. 92415-0942

14455 Civic Drive, Victorville, CA 92392

c. Other: _____

2. The petitioner has completed his/her sentence and is entitled to have the felony conviction(s) designated as a misdemeanor(s).
3. The petitioner is still serving his/her sentence and is entitled to resentencing.

Date: _____

Deputy District Attorney