

NOTICE OF AGENCY OFFICIAL NOTICE

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| Name of Business (if applicable): | | | | |
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| Name of property owner, lessee, or person-in-charge of the business or private property: | | | | |
| Address of private property or Business premises: | (Please Print) | | | |
| | (Street, City, State, Zip) | | | |
| | (Business Telephone Number) | | | |
| described person or organization to | ate property or business premises. I hereby authorize the below act as my Agent for the sole purpose of serving the Notice of Code section 9.16.140 and California Penal Code section 602(k). | | | |
| Del Paso Boulevard Partnership (Name of person or organization authorized to act as my Agent) 1031 Del Paso Blvd Sacramento, CA 95815 (Address of person or organization authorized to act as my Agent) (916) 923-6200 (Phone number of person or organization authorized to act as my Agent) | | | | |
| | | | against individuals who were served a Notice of Agency. I further understar | testify in a future criminal proceeding regarding charges brought Notice of Trespass by the Agent I have designated pursuant to this d that at this proceeding I will be asked to testify as to how the Notice of Trespass have injured my property or have interfered, usiness carried on by the premises. |
| | | | property, lessee, or person-in-charge of grant Agency to the above person or | I understand the above, and that I am the actual owner of the of the private property or business premises and am authorized to organization for the purposes of serving the Notice of Trespass section 9.16.140 and California Penal Code section 602(k). |
| | | | Date this | day of, 20, at |
| (City) | (State) | | | |
| (Print Name) | (Signature) | | | |
| (Emergency Telephone number) | (Email address) | | | |