

**CR – 416** Sacramento Superior Court, Proof of Service – Sex Offender Registration Termination  
(Pen. Code, § 290.5)

**Instructions**

- This form is for providing proof that a copy of a filed Petition to Terminate Sex Offender Registration (form CR-415) and proof of current registration was served (delivered) to the required law enforcement agencies and district attorney’s offices. Read Information on Filing a Petition to Terminate Sex Offender Registration (form CR-415-INFO) for more information.
- The person who serves (delivers) a document or form in this case and who fills out this form must be at least 18 years old.
- This form is for proof of service by mail or personal delivery.
- File a completed form with the court. Keep a copy of this form for your records.

Clerk stamps date here when form is filed

**1** At the time I served the Petition to Terminate Sex Offender Registration (form CR-415) and proof of current registration, I was at least 18 years old.

**2** My name is: \_\_\_\_\_  
My mailing address is: \_\_\_\_\_

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

**Court name and street address:**

Superior Court of California, County of  
Sacramento  
720 9th Street  
Sacramento, CA 95814-1302

Case Number

(this number given to you by the  
court):

**3** I served copies of the Petition to Terminate Sex Offender Registration and proof of current registration filed  
(check one):

for myself  on behalf of (name of petitioner): \_\_\_\_\_

**4** I mailed or personally delivered a filed-stamped copy of Petition to Terminate Sex Offender Registration (form CR-415) and proof of current registration to the agencies listed below:

**a. Registering law enforcement agency**

Name of agency: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date of service: \_\_\_\_\_

Method of service: (check one):

Mailed the documents to the agency at the address above in a sealed envelope from  
(city, state): \_\_\_\_\_ by depositing the envelope with the U.S.  
Postal Service.

Delivered in person to (name): \_\_\_\_\_

At (time): \_\_\_\_\_ at the address above.

b. **District attorney (county of registration):**

County of: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date of service: \_\_\_\_\_

Method of service: *(check one):*

Mailed the documents to the agency at the address above in a sealed envelope from  
*(city, state):* \_\_\_\_\_ by depositing the envelope with the U.S.  
Postal Service.

Delivered in person to *(name):* \_\_\_\_\_  
At *(time):* \_\_\_\_\_ at the address above.

c.  **Law enforcement agency (county of conviction, if different than county of registration)**

Name of Agency: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date of service: \_\_\_\_\_

Method of service:  Mailed the documents to the agency at the address above in a sealed envelope from  
*(city, state):* \_\_\_\_\_ by depositing the envelope with the U.S.  
Postal Service.

Delivered in person to *(name):* \_\_\_\_\_  
At *(time):* \_\_\_\_\_ at the address above.

d.  **District Attorney (county of conviction, if different than county of registration)**

County of: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date of service: \_\_\_\_\_

Method of service:  Mailed the documents to the agency at the address above in a sealed envelope from  
*(city, state):* \_\_\_\_\_ by depositing the envelope with the U.S.  
Postal Service.

Delivered in person to *(name):* \_\_\_\_\_  
At *(time):* \_\_\_\_\_ at the address above.

Check here if you served copies of the petition and proof of current registration to additional law enforcement agencies and district attorney's offices. Attach a separate page listing the names, addresses, date of service, and method of service of each additional copy you served. Write "CR-416, Item 4" on the top of the page.

5 I declare under penalty of perjury under California state law that the information above is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Printed name of server*

▶ \_\_\_\_\_  
*Server signs here after serving*