

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):

Space Below for Use of Court Clerk Only

TELEPHONE NO.:

FAX NO. (Optional):

E-MAIL ADDRESS (Optional):

Attorney(s) for Plaintiff(s):

IN THE SUPERIOR COURT, BAKERSFIELD JUDICIAL DISTRICT,
County of Kern, State of California

vs.

Plaintiff(s)

No.

EXEMPLIFICATION

Defendant(s)

(Abbreviated Title)

COUNTY OF KERN, STATE OF CALIFORNIA

I, the undersigned, Clerk of the above-named court, certify and attest that the attached

consisting of _____ page(s) is a true and correct copy of the original on file in the above-named Court.

Date
(SEAL)

Clerk of said Superior Court

COUNTY OF KERN, STATE OF CALIFORNIA

I, the undersigned, a Judge of the above-named court, certify that _____ whose name is subscribed to the foregoing certificate and attestation, is the Clerk of the above-named court, having a seal, which seal is affixed hereto; that s/he is the proper officer of the court authorized by law to execute the same; that the signature of the said clerk thereon is genuine; and that the attestation is in due form according to the laws of the State of California.

Date
(SEAL)

Judge of said Superior Court