

APPLICATION FOR EXECUTIVE CLEMENCY
Commutation of Sentence

Honorable Governor
State of California
State Capitol
Sacramento, California 95814

I hereby make application for a Commutation of Sentence pursuant to Penal Code (PC) Section 4800, and respectfully represent the facts as follows:

Specify the Action you are requesting of the Governor

- Traditional Pardon**
- Reduction of your Conviction Level**
- Reduction of your Sentence**
- Release from Prison**
- Discharge from Parole**
- Declaration of Innocence**
- Other (If Other, BRIEFLY EXPLAIN)**

Have you previously applied for a Commutation of Sentence? **YES** (If Yes, *WHEN?*) _____
 NO

LAST Name	FIRST Name	MIDDLE Name		
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Date of Birth	Place of Birth	Citizenship	Social Security Number	Prison Number

ALIASES, if any

LAST Name	FIRST Name	MIDDLE Name
<hr/>		
LAST Name	FIRST Name	MIDDLE Name

RESIDENCE, If NOT in Custody

Address	Apartment, Lot, Suite, Space, etc.	
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Zip Code	City	State

RESIDENCE, If In Custody

Prison Address	Building, Block, or Tier	Bunk or Bed
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Zip Code	City	State

CONVICTION INFORMATION

Arresting Agency _____ Defense Attorney's Name – LAST, First Middle _____ Prosecuting Attorney's Name – LAST, First Middle _____

Judge or Jury Trial? _____ Judge's Name – LAST, First Middle, IF APPLICABLE _____ What did you PLEA? _____ County of Conviction _____

Commitment Offense _____ Sentence Imposed by Court _____

Date Sentenced by Court _____ Date Received at Prison _____

If you are a prisoner, what is your EARLIEST POSSIBLE RELEASE DATE (EPRD) or MEPD? _____

Were you living with and / or supporting your family at the time of your conviction? YES
 NO (If No, BRIEFLY EXPLAIN) _____

Have you ever been addicted to alcohol or narcotics? YES (If Yes, BRIEFLY EXPLAIN) _____
 NO _____

If your case was appealed to the Supreme or Appellate Court, please provide a copy of the Appellate Opinion.
If you are unable to provide a copy of the Appellate Opinion, please provide the following:

Date Appeal Filed _____ Appellate Case Number _____ BRIEFLY SUMMARIZE the Grounds for Appeal and the Court's Opinion. _____

PRIOR CONVICTIONS

FELONY _____
County of Conviction _____ Date Sentenced by Court _____

MISDEMEANOR _____
Commitment Offense _____ Sentence Imposed by Court _____

FELONY _____
County of Conviction _____ Date Sentenced by Court _____

MISDEMEANOR _____
Commitment Offense _____ Sentence Imposed by Court _____

EMPLOYMENT

Most recent Employer _____
Employer's Name _____ Title / Position _____

Employer's Location – Address City, State ZIP Code _____ Supervisor's Name – First Middle Last _____

