

.ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>NAME AND ADDRESS</i>): ATTORNEY FOR (<i>NAME</i>):	TELEPHONE NO.:	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA BARBARA STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
PLAINTIFF: DEFENDANT:		
DECLARATION TO FILE ABSTRACT OF JUDGMENT UNDER CCP 674, 708.160		CASE NUMBER:

I am the plaintiff plaintiff's attorney of record in the above entitled action. I make this declaration of my own knowledge. I am competent to testify and would testify as follows:

1. In the above action, in Superior Court of California, County of Santa Barbara, _____ Division, Case No. _____, judgment was entered on _____ in the amount of \$ _____. No part of this judgment has been paid.

2. Defendant resides place of business in the County of _____, California, which is more than 150 miles from the City of _____ in the County of _____, wherein judgment was entered.

3. Defendant refuses to appear in _____, California for an Order of Examination. Plaintiff desires to examine him/her in the County of _____, California.

I declare under penalty of perjury that the above is true.

Date: _____

Declarant