

Code	Violation	Description	Received	Penalty	Admin Fee	Total
VI/OR	21113 (A) CVC	VEHICLE TAKING TWO STALLS	\$0.00	\$71.00	\$0.00	\$71.00

\$71.00 If paid by 08/11/2014

\$121.00 If paid after 08/11/2014

DUE DATE	08/11/2014
TOTAL DUE	\$71.00

IF PAID BY DUE DATE

Notice Date 07/28/2014	Reference Number 0071-6848-1913-7189	Req. Exp. Date 04/08/2015
State / License CA / 6HWR601	Vehicle Make FORD	Vehicle Color BLACK
Citation Number 55127848	Date Issued 07/02/2014	Time Issued 0939

**REMIT TO
ISSUING
AGENCY:**

UC SAN FRANCISCO P&T (71)
c/o Parking Citation Service Center
P. O. BOX 11923
SANTA ANA, CA 92711

UC SAN FRANCISCO P&T 71-55127848
c/o Parking Citation Service Center
Post Office Box 11923
Santa Ana, CA 92711

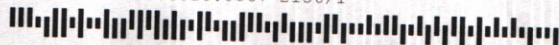
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PARKING CITATION SERVICE CENTER NOTICE OF DELINQUENT PARKING VIOLATION

WARNING

If you do not respond to this notice by the due date, the California Department of Motor Vehicles will be notified of each outstanding citation and will refuse to renew your California vehicle registration.

PGC0727A AUTO MIXED AADC 926
7000002156 00.0010.0067 2156/1



ANDERSON TIFFANY KAY
2 N AVENA AVE
LODI CA 95240-2808

Notice Date 07/28/2014	Reference Number 0071-6848-1913-7189	Req. Exp. Date 04/08/2015
State / License CA / 6HWR601	Vehicle Make FORD	Vehicle Color BLACK
Citation Number 55127848	Date Issued 07/02/2014	Time Issued 0939
Location PARN MU P7 LEVEL		Due Date 08/11/2014

Our records indicate the parking citation(s) listed below have been issued to the vehicle identified above. You must do one of the following by the due date on this notice, to avoid increased penalties, DMV notification 1) Pay the total amount indicated below 2) Request an Administrative Review. If the vehicle described below was sold or transferred prior to the date of the violation(s), you must complete the DECLARATION OF NON-OWNERSHIP on the reverse side and return. Checks should be made payable to the agency listed and mailed to the address indicated. To insure proper credit for your payment, write your license plate number and citation number(s) on your check and enclose the bottom portion of the notice with your payment DO NOT SEND CASH.

For Information: Please Call 1(888) 207-5722 8 AM - 5 PM Monday -Friday, EXCEPT HOLIDAYS. To pay online, visit <https://www.paymycite.com/ucsf>. To appeal your citation online, please visit <http://www.citations.ucsf.edu>.

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DUE DATE 08/11/2014 TOTAL \$71.00

DO NOT MAIL CASH

FOR PROPER CREDIT PLEASE RETURN BOTTOM PORTION WITH YOUR PAYMENT