Applicant Name:	
License / File No.:	
DATE MUST BE RECEIVED BY:	

STATE OF CALIFORNIA DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL

PROTESTANT'S / COMPLAINANT'S DECLARATION

I, PRINT YOU	, declare
	RNAME
under penalty of perjury.	
protest/complaint and know the contents th	ainant herein; that I have read my previously-submitted ereof; that the same is true of my knowledge except to nformation and belief and as to those matters I believe
EXECUTED on	, at
	(Month-Day-Year)
(CITY)	, California
Signature: Full Address:	
Phone No. (non-public & optional):	

Notice to Protestant / Complainant:

- This verification constitutes a personal oath and must, therefore, be signed by each individual verifying the protest.
- A copy of your valid protest (including your name and address) will be provided to the applicant as a public record and pursuant to applicant's discovery rights.