

State of California – Office of Administrative Law
Notice Publication/Regulations Submission
Std. 400 (Rev. 10-2019)

OAL File Numbers:

Notice File Number: **[Z-2021-0126-03]**

Regulatory Action Number: **[Blank]**

Emergency Number: **[Blank]**

For use by Office of Administrative Law (OAL) only

NOTICE SECTION:

[Electronic Submission: Received Date: January 26, 2021. PUBLICATION DATE: February 5, 2021]

For Use by Secretary of State only

[Blank]

Agency with Rulemaking Authority: **[California, Board of Parole Hearings]**

Agency File Number: **[BPH RN 21-01]**

A. Publication of Notice (Complete for publication in Notice Register)

1. Subject of Notice: **[Regulations to Comply with Penal Code 3041.5]**

Title or Titles: **[15]**

First Section Affected: **[2268]**

2. Requested Publication Date: **[February 5, 2021]**

3. Notice Type: **[Notice re Proposed Regulatory Action]**

4. Agency Contact Person: **[George Bakerjian]**

Telephone Number: **[916-322-6729]**

Fax Number: **[916-322-3475]**

OAL Use only

Action on Proposed Notice: **[Not Checked]** Approved as submitted;

[Not Checked] Approved as modified;

[Not Checked] Disapproved/Withdrawn

Notice Register Number: **[Blank]**

Publication Date: **[Blank]**

B. Submission of Regulations (Complete when submitting regulation)

1a. Subject of Regulation(s): **[Blank]**

1b. All Previous related OAL Regulatory Action Number(s):
[Blank]

2. Specify California Code of Regulation Titles and Sections (Including title 26, if toxics related)

Section(s) Affected (List all section number(s) individually. Attach additional sheet if needed.)

Title(s): **[Blank]**

Adopt: **[Blank]**

Amend: **[Blank]**

Repeal: **[Blank]**

3. Type of Filing

[Blank]

4. All beginning and ending dates of availability of modified regulations and/or material added to the rulemaking file (Cal. Code Regs, title 1, §44 and Gov. Code §11347.1):

[Blank]

5. Effective Date of Changes (Gov. Code, §§11343.4, 11346.1(d); Cal. Code Regs, title 1, §100): **[Blank]**

6. Check if these regulations require notice to, or review, consultation, approval or concurrence by, another agency or entity. **[Blank]**

7. Contact Person: **[Blank]**

Telephone Number: **[Blank]**

Fax Number (Optional): **[Blank]**

Email Address: **[Blank]**

8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

Signature of Agency Head or Designee: [Blank]

Typed Name and Title of Signatory: [Blank]

Date: [Blank]

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