

\_\_\_\_\_  
Attorney or party without attorney  
Name, Address & Telephone No.

\_\_\_\_\_  
Attorney for (name)

**Superior Court of California  
County of Sacramento**

Case Title	<b>Case No.</b>  <b>Proof of Service</b>
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**I served a copy of the following documents (list the title of each document served):**

**On (person served):**

**By personally delivering copies to the person served, as follows:**

Date:  
Time:  
Address:

**By mailing copies to the person served, as follows:**

Date:  
Place of mailing (address):

At the time of service I was at least 18 years of age and not a party to this cause.

I declare under penalty of perjury, under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
Type or Print Name and Address

\_\_\_\_\_  
Signature