

ATTORNEY OR PARTY WITHOUT ATTORNEY OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400,17406 <i>(Name, State Bar number, and address):</i>  <hr style="width:10%; margin-left:0;"/>  TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR <i>(Name)</i> : _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b>  STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF:  RESPONDENT/DEFENDANT:  OTHER PARENT/PARTY:	CASE NUMBER:  (If applicable, provide): HEARING DATE: HEARING TIME: DEPT.:
<b>PROOF OF PERSONAL SERVICE</b>	

1. I am at least 18 years old, not a party to this action, and not a protected person listed in any of the orders.
2. Person served *(name)*:
3. I served copies of the following documents *(specify)*:
  
4. By personally delivering copies to the person served, as follows:
  - a. Date: \_\_\_\_\_ b. Time: \_\_\_\_\_
  - c. Address: \_\_\_\_\_
  
5. I am
  - a.  not a registered California process server.
  - b.  a registered California process server.
  - c.  an employee or independent contractor of a registered California process server.
  - d.  exempt from registration under Business & Profession Code section 22350(b).
  - e.  a California sheriff or marshal.
6. My name, address, and telephone number, and, if applicable, county of registration and number *(specify)*:
  
7.  I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
8.  I am a California sheriff or marshal and I certify that the foregoing is true and correct.

Date:

\_\_\_\_\_  
 (TYPE OR PRINT NAME OF PERSON WHO SERVED THE PAPERS)

\_\_\_\_\_  
 (SIGNATURE OF PERSON WHO SERVED THE PAPERS)