

GOVERNMENTAL AGENCY (under Fam. Code, §§ 17400, 17406) TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS: _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	
PROOF OF SERVICE BY MAIL	CASE NUMBER: _____

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.
2. My business address is *(specify)*:

3. I served a copy of the following documents *(specify)*:

- Notice of Motion (Governmental) ([form FL-680](#)) and supporting attachments
- Responsive Declaration to Request for Order ([form FL-320](#))
- Response to Notice of Motion to Cancel (Set Aside) Judgment of Parentage ([form FL-276](#))
- Responsive Declaration to Application to Cancel (Set Aside) Voluntary Declaration of Parentage or Paternity ([form FL-285](#))
- Notice of Opposition and Notice of Motion on Claim of Exemption (Governmental) ([form FL-677](#))
- Other *(specify)*:

by enclosing them in an envelope AND

- a. **depositing** the sealed envelope with the U.S. Postal Service with the postage fully prepaid.
- b. **placing** the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the U.S. Postal Service in a sealed envelope with postage fully prepaid.

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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4. Each envelope was addressed and mailed as follows:

(a) Date mailed:

(b) Place of mailing (*city and state*):

Name of party or attorney served:

Name of party or attorney served:

(c) Address:

(c) Address:

Name of party or attorney served:

Name of party or attorney served:

(c) Address:

(c) Address:

Name of party or attorney served:

Name of party or attorney served:

(c) Address:

(c) Address:

5. The address for each individual identified in item 4 was

a. verified by the California Child Support Enforcement System (CSE) as the current primary mailing address on file.

b. other (*specify*):

6. 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)



(SIGNATURE OF PERSON COMPLETING THIS FORM)

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