	POS-010
ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO. (Optional):	
E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS: CITY AND ZIP CODE:	
BRANCH NAME:	
PLAINTIFF/PETITIONER:	CASE NUMBER:
DEFENDANT/RESPONDENT:	
PROOF OF SERVICE OF SUMMONS	Ref. No. or File No.:
(Separate proof of service is required for each party se	ved.)
1. At the time of service I was at least 18 years of age and not a party to this action.	
2. I served copies of:	
a summons	
b complaint	
c. Alternative Dispute Resolution (ADR) package	
d. Civil Case Cover Sheet (served in complex cases only)	
e cross-complaint f other ( <i>specify documents</i> ):	
3. a. Party served (specify name of party as shown on documents served):	
b. Person (other than the party in item 3a) served on behalf of an entity or as an under item 5b on whom substituted service was made) ( <i>specify name and rela</i>	
4. Address where the party was served:	
5. I served the party <i>(check proper box)</i>	
a. by personal service. I personally delivered the documents listed in item 2 t	
receive service of process for the party (1) on (date):	(2) at <i>(time):</i>
b. <b>by substituted service.</b> On ( <i>date</i> ): at ( <i>time</i> ): I have a service of ( <i>name and title or relationship to person indicated in item</i> )	eft the documents listed in item 2 with or 3):
(1) <b>(business)</b> a person at least 18 years of age apparently in charg of the person to be served. I informed him or her of the general n	•
(2) (home) a competent member of the household (at least 18 years of age) at the dwelling house or usual place of abode of the party. I informed him or her of the general nature of the papers.	
(3) (physical address unknown) a person at least 18 years of age address of the person to be served, other than a United States P him or her of the general nature of the papers.	

- (4) I thereafter mailed (by first-class, postage prepaid) copies of the documents to the person to be served at the place where the copies were left (Code Civ. Proc., § 415.20). I mailed the documents on *(date):* from *(city):* or a declaration of mailing is attached.
- (5) I attach a **declaration of diligence** stating actions taken first to attempt personal service.

PLAINTIFF/PETITIONER:	CASE NUMBER:	
DEFENDANT/RESPONDENT:		
5. c. by mail and acknowledgment of receipt of service. I mailed the documents listed in item 2 to the party, to the address shown in item 4, by first-class mail, postage prepaid,		
to me. (Attach completed Notice and Acknowledgement of Receip	(2) from <i>(city):</i> of the <i>Notice and Acknowledgment of Receipt</i> and a postage-paid return envelope addressed <i>completed</i> Notice and Acknowledgement of Receipt.) (Code Civ. Proc., § 415.30.) putside California with return receipt requested. (Code Civ. Proc., § 415.40.)	
d. by other means (specify means of service and authorizing code section):		
416.20 (defunct corporation)416.60 (minor)416.30 (joint stock company/association)416.70 (ward of416.40 (association or partnership)416.90 (author)416.50 (public entity)415.46 (occup	or conservatee) rized person)	
<pre>// Person who served papers a. Name: b. Address: c. Telephone number: d. The fee for service was: \$ e. I am:</pre>		
<ul> <li>8. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.</li> <li>or</li> </ul>		
9. I am a California sheriff or marshal and I certify that the foregoing is true and correct.		
Date:		
(NAME OF PERSON WHO SERVED PAPERS/SHERIFF OR MARSHAL)	(SIGNATURE )	