

NAME:	CASE NUMBER:
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(PROOF OF SERVICE BY MAIL - C.C.P. §§ 1013a and 2015.5)

I am a resident of the County of _____ . I am over the age of 18 years and not a party to the within above entitled action; my business/residence address is:

On _____, I served the within _____

_____ on the _____ in said action, by placing a true copy thereof enclosed in a sealed envelope with postage thereon fully prepaid, in the United States Post Office mail box at _____, address as follows:

I, _____, certify (or declare), under penalty
(name must be typed or printed)
of perjury,* that the foregoing is true and correct. Executed on _____,
(date)
_____, California
(place)

** proof of service by mail forms, being signed under penalty of perjury, do not require notarization.*