

SHORT TITLE: CITATION RE ADOPTION PROOF OF SERVICE	CASE NUMBER:
--	--------------

PLEASE TYPE OR PRINT – I served the citation as follows:

	CITEE 1	CITEE 2
1. NAME:		
2. PERSON SERVED AND TITLE		
3. PERSON WITH WHOM LEFT: TITLE OR RELATIONSHIP TO PERSON SERVED		
4. DATE AND TIME OF DELIVERY:		
5. MAILING DATE, TYPE OF MAIL:		
6. ADDRESS, CITY AND STATE (WHEN REQUIRED INDICATE WHETHER ADDRESS IS HOME OR BUSINESS):		

7. MANNER OF SERVICE: (CHECK APPLICABLE BOX FOR EACH PERSON SERVED AND COMPLETE THIS FORM.)		
(C-1)	(C-2)	
<input type="checkbox"/>	<input type="checkbox"/>	(PERSONAL SERVICE) BY HANDING COPIES TO THE PERSON SERVED (C.C.P. §415.10)
<input type="checkbox"/>	<input type="checkbox"/>	(SUBSTITUTED SERVICE ON CORPORATION, UNINCORPORATED ASSOCIATION (INCLUDING PARTNERSHIP), OR PUBLIC ENTITY) BY LEAVING, DURING USUAL OFFICE HOURS, COPIES IN THE OFFICE OF THE PERSON SERVED WITH THE PERSON WHO APPARENTLY WAS IN CHARGE AND THEREAFTER MAILING (BY FIRST-CLASS MAIL, POSTAGE PREPAID) COPIES TO THE PERSON SERVED AT THE PLACE WHERE THE COPIES WERE LEFT. (C.C.P. §415.20(a).) PLACE OF MAILING
		(C-1) (C-2)
<input type="checkbox"/>	<input type="checkbox"/>	(SUBSTITUTED SERVICE ON NATURAL PERSON, MINOR, INCOMPETENT, OR CANDIDATE) BY LEAVING COPIES AT THE DWELLING HOUSE, USUAL PLACE OF ABODE, OR USUAL PLACE OF BUSINESS OF THE PERSON SERVED IN THE PRESENCE OF A COMPETENT MEMBER OF THE HOUSEHOLD OR A PERSON APPARENTLY IN CHARGE OF HS OFFCE OR PLACE OF BUSINESS, AT LEAST 18 YEARS OF AGE, WHO WAS INFORMED OF THE GENERAL NATURE OF THE PAPERS, AND THEREAFTER MAILING (BY FIRST-CLASS MAIL, POSTAGE PREPAID) COPIES TO THE PERSON SERVED AT THE PLACE WHERE THE COPIES WERE LEFT. (C.C.P. § 415.20(b) ATTACH SEPARATE DECLARATION OR AFFIDAVIT STATING ACTS RELIED ON TO ESTABLISH REASONABLE DILIGENCE IN FIRST ATTEPTION PERSONAL SERVICE.) PLACE OF MAILING
		C-1) (C-2)
<input type="checkbox"/>	<input type="checkbox"/>	(MAIL AND ACKNOWLEDGEMENT SERVICE) BY MAILING (BY FIRST-CLASS OR AIRMAIL) COPIES TO THE PERSON SERVED, TOGETHER WITH TWO COPIES OF THE FORM OF NOTICE AND ACKNOWLEDGEMENT AND A RETURN ENVELOPE, POSTAGE PREPAID, ADDRESSED TO THE SENDER (C.C.P. §415.30 ATTACH WRITTEN ACKNOWLEDGEMENT OF RECEIPT.) PLACE OF MAILING:
		C-1) (C-2)
<input type="checkbox"/>	<input type="checkbox"/>	(CERTIFIED OR REGISTERED MAIL SERVICE) BY MAILING TO ADDRESS OUTSIDE CALIFORNIA (BY REGISTERED OR CERTIFIED AIRMAIL WITH RETURN RECEIPT REQUESTED) COPIES TO THE PERSON SERVED. (C.C.P. §415.40 ATTACH SIGNED RETURN RECEIPT OR OTHER EVIDENCE OF ACTUAL DELIVERY TO THE PERSON SERVED.) PLACE OF MAILING:
		C-1) (C-2)
<input type="checkbox"/>	<input type="checkbox"/>	(OTHER- C.C.P. §§ 413.10, 41330, 417.10-417-30 – ATTACH SEPARATE PAGES IF NECESSARY.)

The notices stated on the citation appeared on the copy served (C.C.P. §412.30 or 474). At the time of service I was at least 18 years of age and not a party to the action.

Fee for service \$, Mileage \$, Notary \$, Total \$.

TO BE COMPLETED IN CALIFORNIA BY A PROCESS SERVER, OTHER THAN A SHERIFF, MARSHAL OR CONSTABLE.

TO BE COMPLETED IN CALIFORNIA BY SHERIFF, MARSHAL OR CONSTABLE.

I declare under penalty of perjury that the foregoing is true and correct and this declaration was executed on (insert date) at (insert place) , California

I declare under penalty of perjury that the foregoing is true and correct and this declaration was executed on (insert date)

(Type or print name, address and telephone number)

(Type or print name, title, county and, when applicable, Municipal or Justice Court District)

Signature _____

Signature _____

THIS DECLARATON OR CERTIFICATE OF SERVICE MUST BE EXECUTED WITHIN CALIFORNIA. (C.C.P. §2015.5) A PROOF OF SERVICE EXECUTED OUTSIDE CALIFORNIA MUST BE MADE BY AFFIDAVIT.