	CASE NUMBER
	DECLARATION OF MAILING OR OF INABILITY TO ASCERTAIN ADDRESS
(ABBREVIATED TITLE)	
The address of the defendant, respondent, or citee _	having been
by the court, I mailed a copy of the	Summons, Citation, Statement of Damages, ordered to the defendant, respondent, or citee,
at	(ADDRESS CITY AND STATE)
DATE: (TYPE OR PR	INT NAME) (SIGNATURE OF DECLARANT)
During the court ordered period of publication of the	Summons, Citation, the address of the defendant,
respondee or citee(NAME)	was not ascertained.
PROOF OF S I am over the age of 18 and not a party to this cause. I	was not ascertained.  SERVICE BY MAIL  am a resident of or employed in the country where the mailing
PROOF OF S  I am over the age of 18 and not a party to this cause. I occurred. My residence or business address is (specify I served the foregoing Declaration of Mailing or of In	was not ascertained.  SERVICE BY MAIL  am a resident of or employed in the country where the mailing y):  ability to Ascertain Address on each person named below by
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