

NAME, ADDRESS AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY: (STATE BAR NUMBER, IF APPLICABLE )	FOR COURT USE ONLY
ATTORNEY FOR (Name):	
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES</b>	
COURTHOUSE ADDRESS:	
PEOPLE OF THE STATE OF CALIFORNIA VS	
MINOR:	
<b>PROOF OF SERVICE</b>	CASE NUMBER:

1. At the time of service I was over 18 years of age.

2. My residence or business address is:

\_\_\_\_\_

\_\_\_\_\_

3. Type of Service:

**BY MAIL:**

On \_\_\_\_\_ I served the Application/Petition for Change in Disposition-Response, in this case by placing a copy thereof, enclosed in a sealed envelope with first class postage prepaid, in the United States Mail at \_\_\_\_\_, in the county of \_\_\_\_\_, State of California, (CITY) (COUNTY)

said envelope having been address as follows:

Name of party served: Los Angeles County District Attorney

Street address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

At the time of mailing, I was employed or resided in the county where said mailing occurred.

**PERSONAL SERVICE:**

On \_\_\_\_\_ I personally delivered to and left copies of the Application/Petition for Change in Disposition-Response, in this case with the party served at the address below:

Name of party served: Los Angeles County District Attorney

Street address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

4. Executed on \_\_\_\_\_ at \_\_\_\_\_, California.  
(DATE) (CITY)

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

Signature of Declarant: \_\_\_\_\_

**PROOF OF SERVICE**