

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name, State Bar Number and Address</i> )  TELEPHONE NO: E-MAIL ADDRESS ( <i>Optional</i> ): ATTORNEY FOR ( <i>Name</i> ):	FOR COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA</b> STREET ADDRESS: MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San Jose, California 95113 BRANCH NAME:	
PLAINTIFF/PETITIONER:  DEFENDANT/RESPONDENT:	CASE NUMBER:  JUDICIAL OFFICER:
<b>CONSENT TO ELECTRONIC FILING AND SERVICE AND NOTICE OF ELECTRONIC SERVICE ADDRESS</b>	DEPT:

1.  The following party or  the attorney for:

- a.  Plaintiff (*name*):
- b.  Defendant (*name*):
- c.  Petitioner (*name*):
- d.  Respondent (*name*):
- e.  Other (*describe*):

Consents to electronic filing of pleadings, and service of notices and documents in the above-captioned action.

2. The electronic service address of the person identified in item 1 is (*specify*):

Date:

\_\_\_\_\_  
 (TYPE OR PRINT NAME)

▶ \_\_\_\_\_  
 (SIGNATURE OF PARTY OR ATTORNEY)

CASE NAME:	CASE NUMBER:
------------	--------------

(Note: *If you serve Consent to Electronic Filing and Service of Pleadings, and Notice of Electronic Service Address by mail, you should use form POS-030, Proof of Service by First-Class Mail-Civil, instead of using this page.*)

**PROOF OF ELECTRONIC SERVICE  
 CONSENT TO ELECTRONIC FILING AND SERVICE OF PLEADINGS  
 AND NOTICE OF ELECTRONIC SERVICE ADDRESS**

1. I am at least 18 years old and not a party to this action.
  - a. My residence or business address is *(specify)*:
  
  - b. My electronic service address is *(specify)*:
  
2. I electronically served a copy of the Consent to Electronic Service and Notice of Electronic Service Address as follows:
  - a. Name of person served:
  
  - b. Electronic service address of person served:  
 On behalf of *(name or names of parties represented, if person served is an attorney)*:
  
  - c. On *(date)*:
  
  - d. At *(time)*:

Electronic service of the Consent to Electronic Service and Notice of Electronic Service Address on additional persons is described in an attachment.

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

Date:

\_\_\_\_\_  
 (TYPE OR DECLARANT)

▶

\_\_\_\_\_  
 (SIGNATURE OF PARTY OR DECLARANT)