

**\*\*Sample Form\*\***

ATTORNEY OR PARTY WITHOUT ATTORNEY ( <i>Name and Address</i> ) TELEPHONE NO:  ATTORNEY FOR ( <i>Name</i> )	<b>FOR COURT USE ONLY</b>
NAME OF COURT: STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PETITIONER/PLAINTIFF:  RESPONDENT/DEFENDANT:	
<b>DECLARATION OF PERSONAL SERVICE</b>	

\_\_\_\_\_ declares: I am and was on the dates herein mentioned over the age of eighteen years and not a party to this action; I served the (insert name of paper(s) served): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ in this action by personally delivering to and leaving with the following person (s). In the County of \_\_\_\_\_.

State of California, on the date set opposite their respective names, a true copy thereof, to-wit:

Name: \_\_\_\_\_ Date served: \_\_\_\_\_

Address: \_\_\_\_\_ Time served: \_\_\_\_\_

Name: \_\_\_\_\_ Date served: \_\_\_\_\_

Address: \_\_\_\_\_ Time served: \_\_\_\_\_

Name: \_\_\_\_\_ Date served: \_\_\_\_\_

Address: \_\_\_\_\_ Time served: \_\_\_\_\_

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

Executed on \_\_\_\_\_ at \_\_\_\_\_, California.  
(date) (place)

\_\_\_\_\_  
Signature

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