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PETITIONER:	CASE NUMBER:
RESPONDENT:	

3. b. (cont.) on (date): at (time):

I thereafter mailed additional copies (by first class, postage prepaid) to the respondent at the place where the copies were left (Code Civ. Proc., § 415.20b) on (date):

A **declaration of diligence** is attached, stating the actions taken to first attempt personal service.

c. ☐ **Mail and acknowledgment service.** I mailed the copies to the respondent, addressed as shown in item 2, by first-class mail, postage prepaid, on (date): from (city):

(1) ☐ with two copies of the *Notice and Acknowledgment of Receipt (Family Law)* (form FL-117) and a postage-paid return envelope addressed to me. **(Attach completed Notice and Acknowledgment of Receipt (Family Law) (form FL-117).)** (Code Civ. Proc., § 415.30.)

(2) ☐ to an address outside California (by registered or certified mail with return receipt requested). **(Attach signed return receipt or other evidence of actual delivery to the respondent.)** (Code Civ. Proc., § 415.40.)

d. ☐ **Other** (specify code section):

☐ Continued on Attachment 3d.

4. The "NOTICE TO THE PERSON SERVED" on the *Summons* was completed as follows (Code Civ. Proc., §§ 412.30, 415.10, 474):

a. ☐ As an individual **or**

b. ☐ On behalf of respondent who is a

(1) ☐ minor. (Code Civ. Proc., § 416.60.)

(2) ☐ ward or conservatee. (Code Civ. Proc., § 416.70.)

(3) ☐ other (specify):

#### 5. Person who served papers

Name:

Address:

Telephone number:

This person is

a. ☐ exempt from registration under Business and Professions Code section 22350(b).

b. ☐ not a registered California process server.

c. ☐ a registered California process server: ☐ an employee or ☐ an independent contractor

(1) Registration no.:

(2) County:

d. **The fee** for service was (specify): \$

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

—or—

7. ☐ **I am a California sheriff, marshal, or constable**, and I certify that the foregoing is true and correct.

Date:

\_\_\_\_\_  
(NAME OF PERSON WHO SERVED PAPERS)



\_\_\_\_\_  
(SIGNATURE OF PERSON WHO SERVED PAPERS)