

ATTORNEY OR PARTY WITHOUT ATTORNEY NAME: FIRM NAME: STREET ADDRESS: CITY: TELEPHONE NO.: E-MAIL ADDRESS: ATTORNEY FOR (<i>name</i>):	STATE BAR NUMBER: STATE: ZIP CODE: FAX NO.:	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
PETITIONER: RESPONDENT:		
NOTICE OF APPEAL (Menacing Dog)		CASE NUMBER:

1. I am the petitioner respondent in this action.
2. I appeal from the order entered by (*court or agency name*):
on (*date*):
3. I received a copy of the order on (*date*):

Date:

(TYPE OR PRINT NAME)

►
(SIGNATURE)

(Proof of Service on reverse)

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PLAINTIFF:	CASE NUMBER:
DEFENDANT:	

PROOF OF SERVICE

Notice of Appeal—Menacing Dog

Personal Service Certified Mail

Service of the notice on the other party may be made by one of the following ways:

- (1) Personally delivering these papers to the other party.

OR

- (2) Mailing the papers by first-class mail, postage prepaid, mailed to the last known address of the other party.

Anyone at least 18 years of age EXCEPT ANY PARTY may personally serve or mail the notice. Be sure whoever served the notice fills out and signs this proof of service. File this proof of service with the court as soon as the notice is served.

1. At the time of service I was at least 18 years of age and **not a party to this legal proceeding**.
2. I served copies of the following papers in the manner shown:
 - a. Papers served: **Notice of appeal (Menacing Dog)**
 - b. Manner of service (*check and complete either (1) or (2) below*)
 - (1) **Personal service.** I personally delivered these papers to the other party as follows:
 - (a) Name:
 - (b) Address where served:
 - (c) Date served:
 - (d) Time served:
 - (2) **First-class mail.** I deposited these papers in the United States mail, in a sealed envelope with postage fully prepaid. The envelope was addressed and mailed to the owner or keeper of the dog as follows:
 - (a) Name:
 - (b) Address:
 - (c) Date of mailing:
 - (d) Place of mailing (*city, state*):
 - (e) I am a resident of or employed in the county where the notice was mailed.
3. My residence or business address is:

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

Date:



(TYPE OR PRINT NAME OF PERSON WHO SERVED THE NOTICE)

(SIGNATURE OF PERSON WHO SERVED THE NOTICE)

Telephone number of person who served the notice: