

SHORT TITLE:	CASE NUMBER:
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ATTACHMENT TO PROOF OF SERVICE BY FIRST-CLASS MAIL—CIVIL (PERSONS SERVED)

(This Attachment is for use with form POS-030)

NAME AND ADDRESS OF EACH PERSON SERVED BY MAIL:

Name of Person Served

Address (number, street, city, and zip code)

The image consists of a grid of 20 empty rectangular boxes. The boxes are arranged in two columns of 10. Each box is defined by a thin black border. The entire grid is set against a white background.