

**SUPERIOR COURT OF CALIFORNIA
COUNTY OF SAN FRANCISCO**

Document Scanning Lead Sheet

Apr-21-2015 1:32 pm

Case Number: CSM-15-848736

Filing Date: Apr-21-2015 1:31

Filed by: PAUL FIOL

Juke Box: 001 Image: 04878939

PROOF OF SERVICE ON CLAIM

J YO WONG VS. JAKE JINENEZ

001C04878939

Instructions:

Please place this sheet on top of the document to be scanned.

SC-104**Proof of Service**

Use this form to serve a **person**, **business**, or a **public entity**. To learn more about proof of service, read *What Is "Proof of Service"?*, Form SC-104B. To learn more about how to serve a business or entity, read *How to Serve a Business or Public Entity*, Form SC-104C.

To serve a **business**, you must serve **one** of the following people:

- Owner (for a sole proprietorship)
- Partner (for a partnership) or general partner (for a limited partnership)
- Any officer or general manager (corporation or association)
- Any person authorized for service by the business (corporation, association, general partnership, limited partnership)
- Any person authorized for service with the Secretary of State (corporation, association, limited liability company (LLC), limited liability partnership (LLP), limited partnership)

To serve a **public entity**, you must first file a claim with that entity, then serve **one** of the following people:

- Clerk (of a city or county)
- Chief Officer or Director (of a public agency)
- Any person authorized for service by the entity

- ① a. If you are serving a **person**, write the person's name below:

Jake Jimenez

- b. If you are serving a **business** or **entity**, write the name of the business or entity, the person authorized for service, and that person's job title:

Business or Agency Name	Person Authorized for Service	Job Title

② **Instructions to Server:**

You must be at least 18 years old and **not be named in this case**. Follow these steps:

Give a copy of all the documents checked in ③ to:

- The person in ①, or
- A competent adult (at least 18) living with, and at the home of the person in ①, or
- An adult (at least 18) who seems to be in charge at the usual workplace of the person in ①, or
- An adult (at least 18) who seems to be in charge where the person in ① receives mail, (but not a U.S. post office box), if there is no known physical address for the person in ①.

THEN,

- Mail a copy of the documents to the person in ①,
- Complete and sign this form, and
- Give or mail your completed form to the person who asked you to serve these court papers.

③ **I served the person in ① a copy of the documents checked below:**

- ✓ a. ☒ SC-100, Plaintiff's Claim and ORDER to Go to Small Claims Court
- b. ☐ SC-120, Defendant's Claim and ORDER to Go to Small Claims Court
- c. ☐ Order for examination (This form must be personally served. Check the form that was served):

Note: The court can issue a civil arrest warrant if the served party does not come to court **only** if the order for examination was personally served by a registered process server, sheriff, marshal, or someone appointed by the court.

(1) ☐ SC-134, Application and Order to Produce Statement of Assets and to Appear for Examination

(2) ☐ AT-138/EJ-125, Application and Order for Appearance and Examination

- d. ☐ Other (specify): _____

Clerk stamps date here when form is filed.

FILED
San Francisco County Superior Court

APR 21 2015

CLERK OF THE COURT

BY: _____

Fill in court name and street address:

Superior Court of California, County of
SAN FRANCISCO

SMALL CLAIMS DIVISION
400 MCALLISTER ST., Rm 103
SAN FRANCISCO, CA 94102

Fill in case number, case name, hearing date, day, time, and department below:

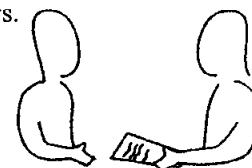
Case Number: CSM848736

Case Name: Wong v. Jimenez

Hearing Date: 4/23/2015

Time: 3:30

Dept.: 506



Case Number:

CSM 848736

Case name: _____

4 Fill out "a" or "b" below:

- a.
- ☒
- Personal Service:**
- I personally gave copies of the documents checked in (3) to the person in (1):

On (date): 4/10/15 At (time): 9:05 ☒ a.m. ☐ p.m.At this address: 505-26th Ave #20City: San Francisco CA State: CA Zip: 94124

- b.
- ☐
- Substituted Service:**
- I personally gave copies of the documents checked in (3) (a, b, or d) to (check one):

☐ A competent adult (at least 18) at the home of, and living with the person in (1), or☐ An adult who seems to be in charge where the person in (1) usually works, or☐ An adult who seems to be in charge where the person in (1) usually receives mail, or has a private post office box (not a U.S. Post Office box), if there is no known physical address for the person in (1).

I told that adult, "Please give these court papers to (name of person in (1))."

I did this on (date): _____ At (time): _____ ☐ a.m. ☐ p.m.

At this address: _____

City: _____ State: _____ Zip: _____

Name or description of the person I gave the papers to: _____

After serving the court papers, I put copies of the documents listed in (3) in an envelope, sealed the envelope, and put first-class prepaid postage on it. I addressed the envelope to the person in (1) at the address where I left the copies.

I mailed the envelope on (date): _____ from (city, state): _____
by leaving it (check one):

a. ☐ At a U.S. Postal Service mail drop, orb. ☐ At an office or business mail drop where I know the mail is picked up every day and deposited with the U.S. Postal Service, orc. ☐ With someone else I asked to mail the documents to the person in (1), and I have attached that person's completed Form SC-104A.**5 Server's Information**Name: Tony Tin Phone: (570) 686-3154Address: 521-26th AveCity: San Francisco State: CA Zip: 94124Fee for service: \$ 40.00

If you are a registered process server:

County of registration: _____ Registration number: _____

- 6**
- I declare under penalty of perjury under California state law that I am at least 18 years old and not named in this case and that the information above is true and correct.

Date: 4/10/2015Tony Tin
Type or print server's nameTony Tin
Server signs here after serving

J. YO WONG
BOX 6676
MORAGA, CA 94570

TO: *Timy Tim 521-26th Ave, San Francisco 94121*
FROM: J. WONG
RE: *Proof of service*
DATE: *4/11/15*

Fill out #4

#6

\$40.00 check enclosed.

Thanks

☒ Track your expenses...

- ☐ Clothing ☐ Food ☐ Transportation
☐ Credit Card ☐ Utilities ☐ Mortgage
☐ Entertainment ☐ Insurance ☐ Other: _____

☐ TAX-DEDUCTIBLE ITEM

1319

BALANCE
FORWARD

THIS ITEM

BALANCE

DEPOSIT

OTHER

BALANCE
FORWARD

W/F.