

1. At the time of service I was at least 18 years of age and not a party to this action.
2. I served copies of:
 - a. ☒ summons
 - b. ☒ complaint
 - c. ☒ Alternative Dispute Resolution (ADR) package
 - d. ☒ Civil Case Cover Sheet (*served in complex cases only*)
 - e. ☐ cross-complaint
 - f. ☒ other (*specify documents*): NOTICE OF DEPARTMENT ASSIGNMENT AND CASE MANAGEMENT CONFERENCE
3. a. Party served (*specify name of party as shown on documents served*):
BOX SPRINGS MUTUAL WATER COMPANY
- b. ☒ Person (other than the party in item 3a) served on behalf of an entity or as an authorized agent (and not a person under item 5b on whom substituted service was made) (*specify name and relationship to the party named in item 3a*):
ROBYN PHILLIPS, AUTHORIZED SERVICE AGENT TO BOX SPRINGS MUTUAL WATER COMPANY
4. Address where the party was served:
21740 DRACAEA AVE, MORENO VALLEY, CA 92553
5. I served the party (*check proper box*)
 - a. ☐ **by personal service.** I personally delivered the documents listed in item 2 to the party or person authorized to receive service of process for the party (1) on (*date*): _____ (2) at (*time*): _____
 - b. ☐ **by substituted service.** On (*date*): _____ at (*time*): _____ I left the documents listed in item 2 with or in the presence of (*name and title or relationship to person indicated in item 3*): _____
 - (1) ☐ (**business**) a person at least 18 years of age apparently in charge at the office or usual place of business of the person to be served. I informed him or her of the general nature of the papers.
 - (2) ☐ (**home**) a competent member of the household (at least 18 years of age) at the dwelling house or usual place of abode of the party. I informed him or her of the general nature of the papers.
 - (3) ☐ (**physical address unknown**) a person at least 18 years of age apparently in charge at the usual mailing address of the person to be served, other than a United States Postal Service post office box. I informed him or her of the general nature of the papers.
 - (4) ☐ I thereafter mailed (by first-class, postage prepaid) copies of the documents to the person to be served at the place where the copies were left (Code Civ. Proc., § 415.20). I mailed the documents on (*date*): _____ from (*city*): _____ **or** ☐ a declaration of mailing is attached.
 - (5) ☐ I attach a **declaration of diligence** stating actions taken first to attempt personal service.

PLAINTIFF/PETITIONER: CITY OF MORENO VALLEY
 DEFENDANT/RESPONDENT: BOX SPRINGS MUTUAL WATER COMPANY

CASE NUMBER:
 CVRI2304062

5. c. ☒ **by mail and acknowledgment of receipt of service.** I mailed the documents listed in item 2 to the party, to the address shown in item 4, by first-class mail, postage prepaid,
- (1) on (date): 08/08/2023 (2) from (city): SAN DIEGO
- (3) ☒ with two copies of the *Notice and Acknowledgment of Receipt* and a postage-paid return envelope addressed to me. (*Attach completed Notice and Acknowledgement of Receipt.*) (Code Civ. Proc., § 415.30.)
- (4) ☐ to an address outside California with return receipt requested. (Code Civ. Proc., § 415.40.)
- d. ☐ **by other means** (*specify means of service and authorizing code section*):

☐ Additional page describing service is attached.

6. The "Notice to the Person Served" (on the summons) was completed as follows:

- a. ☐ as an individual defendant.
- b. ☐ as the person sued under the fictitious name of (*specify*):
- c. ☐ as occupant.
- d. ☒ On behalf of (*specify*): BOX SPRINGS MUTUAL WATER COMPANY
 under the following Code of Civil Procedure section:

- | | |
|---|---|
| <input checked="" type="checkbox"/> 416.10 (corporation) | <input type="checkbox"/> 415.95 (business organization, form unknown) |
| <input type="checkbox"/> 416.20 (defunct corporation) | <input type="checkbox"/> 416.60 (minor) |
| <input type="checkbox"/> 416.30 (joint stock company/association) | <input type="checkbox"/> 416.70 (ward or conservatee) |
| <input type="checkbox"/> 416.40 (association or partnership) | <input type="checkbox"/> 416.90 (authorized person) |
| <input type="checkbox"/> 416.50 (public entity) | <input type="checkbox"/> 415.46 (occupant) |
| | <input type="checkbox"/> other: |

7. **Person who served papers**

- a. Name: JACOB GILL
- b. Address: 3536 7TH AVENUE UNIT 6D, SAN DIEGO CA 92103
- c. Telephone number: (405) 255-7183
- d. **The fee** for service was: \$ 0.00
- e. I am:

- (1) ☒ not a registered California process server.
- (2) ☐ exempt from registration under Business and Professions Code section 22350(b).
- (3) ☐ a registered California process server:
- (i) ☐ owner ☐ employee ☐ independent contractor.
- (ii) Registration No.:
- (iii) County:

8. ☒ **I declare** under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
 or
9. ☐ **I am a California sheriff or marshal and** I certify that the foregoing is true and correct.

Date: August 29, 2023

JACOB GILL

(NAME OF PERSON WHO SERVED PAPERS/SHERIFF OR MARSHAL)

► 
 (SIGNATURE)

| | |
|---|--------------------|
| ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO: 262087 NAME: MICHAEL R. COBDEN FIRM NAME: LAW OFFICES OF QUINTANILLA & ASSOCIATES STREET ADDRESS: 777 E. TAHQUITZ CANYON WAY SUITE 200-41 CITY: PALM SPRINGS STATE: CA ZIP CODE: 92262 TELEPHONE NO.: 760 993 3702 FAX NO.: E-MAIL ADDRESS: MICHAELCOBDEN@QALAWYERS.COM ATTORNEY FOR (Name): CITY OF MORENO VALLEY | FOR COURT USE ONLY |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE STREET ADDRESS: 4050 MAIN STREET MAILING ADDRESS: CITY AND ZIP CODE: RIVERSIDE 92501 BRANCH NAME: RIVERSIDE HISTORIC COURTHOUSE | |
| Plaintiff/Petitioner: CITY OF MORENO VALLEY Defendant/Respondent: BOX SPRINGS MUTUAL WATER COMPANY | |
| NOTICE AND ACKNOWLEDGMENT OF RECEIPT—CIVIL | |
| CASE NUMBER: CVRI 2304062 | |

TO (insert name of party being served): ROBYN PHILLIPS

NOTICE

The summons and other documents identified below are being served pursuant to section 415.30 of the California Code of Civil Procedure. Your failure to complete this form and return it within 20 days from the date of mailing shown below may subject you (or the party on whose behalf you are being served) to liability for the payment of any expenses incurred in serving a summons on you in any other manner permitted by law.

If you are being served on behalf of a corporation, an unincorporated association (including a partnership), or other entity, this form must be signed by you in the name of such entity or by a person authorized to receive service of process on behalf of such entity. In all other cases, this form must be signed by you personally or by a person authorized by you to acknowledge receipt of summons. If you return this form to the sender, service of a summons is deemed complete on the day you sign the acknowledgment of receipt below.

Date of mailing: 08/08/2023

JACOB T. GILL

(TYPE OR PRINT NAME)



Jacob T. Gill

(SIGNATURE OF SENDER—MUST NOT BE A PARTY IN THIS CASE)

ACKNOWLEDGMENT OF RECEIPT

This acknowledges receipt of (to be completed by sender before mailing):

- ☒ A copy of the summons and of the complaint.
- ☒ Other (specify):

CIVIL CASE COVER SHEET, CERTIFICATE OF COUNSEL, ALTERNATIVE DISPUTE RESOLUTION INFO PACKAGE, NOTICE OF DEPARTMENT ASSIGNMENT, NOTICE OF CASE MANAGEMENT CONFERENCE TO BOX SPRINGS MUTUAL WATER COMPANY

(To be completed by recipient):

Date this form is signed: August 24, 2023

Karen Collins

(TYPE OR PRINT YOUR NAME AND NAME OF ENTITY, IF ANY, ON WHOSE BEHALF THIS FORM IS SIGNED)



Karen Collins

(SIGNATURE OF PERSON ACKNOWLEDGING RECEIPT, WITH TITLE IF ACKNOWLEDGMENT IS MADE ON BEHALF OF ANOTHER PERSON OR ENTITY)

| | |
|--|---|
| ATTORNEY OR PARTY WITHOUT ATTORNEY: NAME: MICHAEL R. COBDEN FIRM NAME: LAW OFFICES OF QUINTANILLA & ASSOCIATES STREET ADDRESS: 777 E. TAHQUITZ CANYON WAY SUITE 200-41 CITY: PALM SPRINGS STATE: CA ZIP CODE: 92262 TELEPHONE NO.: 760 993 3702 FAX NO.: E-MAIL ADDRESS: MICHAELCOBDEN@QALAWYERS.COM ATTORNEY FOR (Name): CITY OF MORENO VALLEY | FOR COURT USE ONLY CASE NUMBER: CvRI 2304062 |
| SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE STREET ADDRESS: 4050 MAIN STREET MAILING ADDRESS: CITY AND ZIP CODE: RIVERSIDE 92501 BRANCH NAME: RIVERSIDE HISTORIC COURTHOUSE | |
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Date of mailing: 08/08/2023

JACOB T. GILL
(TYPE OR PRINT NAME)


(SIGNATURE OF SENDER—MUST NOT BE A PARTY IN THIS CASE)

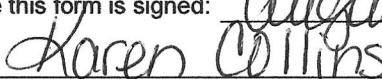
ACKNOWLEDGMENT OF RECEIPT

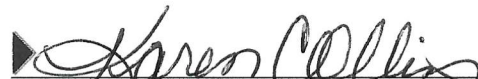
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(To be completed by recipient):

Date this form is signed: August 24, 2023

 (TYPE OR PRINT YOUR NAME AND NAME OF ENTITY, IF ANY, ON WHOSE BEHALF THIS FORM IS SIGNED)


 (SIGNATURE OF PERSON ACKNOWLEDGING RECEIPT, WITH TITLE IF ACKNOWLEDGMENT IS MADE ON BEHALF OF ANOTHER PERSON OR ENTITY)