|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ATTORNEY OR PARTY WITHOUT ATTORNEY*:* | STATE BAR NO: |  |  | ***FOR COURT USE ONLY*** |
| NAME: |  |  |
| FIRM NAME: |  |  |
| STREET ADDRESS: |  |  |
| CITY: |  | STATE: | ZIP CODE: |  |
| TELEPHONE NO.: |  | FAX NO. : |  |  |
| E-MAIL ADDRESS: |  |  |
| ATTORNEY FOR (*name*): |  |  |
| **SUPERIOR COURT OF CALIFORNIA, COUNTY OF** |  |
| STREET ADDRESS: |  |
| MAILING ADDRESS: |  |
| CITY AND ZIP CODE: |  |
| BRANCH NAME: |  |
| CASE NUMBER: |
|  |
| Plaintiff/Petitioner: |  |
| Defendant/Respondent: |  |
|  |
|  | JUDICIAL OFFICER: |
| **PROOF OF SERVICE—CIVIL****Check method of service *(only one):***By Personal Service By MailBy Messenger Service By Fax | By Overnight Delivery |
| DEPARTMENT: |

***Do not use this form to show service of a summons and complaint or for electronic service.***

***See USE OF THIS FORM on page 3.***

1. At the time of service I was over 18 years of age **and not a party to this action**.
2. My residence or business address is:
3. The fax number from which I served the documents is *(complete if service was by fax):*
4. On *(date):* I served the following **documents** *(specify):*

The documents are listed in the *Attachment to Proof of Service–Civil (Documents Served)* (form POS-040(D)).

1. I served the documents on the **person or persons** below, as follows:
	1. Name of person served:
	2. *(Complete if service was by personal service, mail, overnight delivery, or messenger service.)*

Business or residential address where person was served:

* 1. *(Complete if service was by fax.)*

Fax number where person was served:

The names, addresses, and other applicable information about persons served is on the *Attachment to Proof of Service— Civil (Persons Served)* (form POS-040(P)).

1. The documents were served by the following means *(specify):*
	1. **By personal service.** I personally delivered the documents to the persons at the addresses listed in item 5. (1) For a party represented by an attorney, delivery was made (a) to the attorney personally; or (b) by leaving the documents at the attorney's office, in an envelope or package clearly labeled to identify the attorney being served, with a receptionist or an individual in charge of the office; or (c) if there was no person in the office with whom the notice or papers could be left, by leaving them in a conspicuous place in the office between the hours of nine in the morning and five in the evening. (2) For a party, delivery was made to the party or by leaving the documents at the party's residence with some person not younger than 18 years of age between the hours of eight in the morning and eight in the evening.

# PROOF OF SERVICE—CIVIL

**(Proof of Service)**

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|  |  |
| --- | --- |
| CASE NAME: | CASE NUMBER: |

6. b.

c.

d.

e.

(1)

(2)

**By United States mail.** I enclosed the documents in a sealed envelope or package addressed to the persons at the addresses in item 5 and *(specify one)*:

deposited the sealed envelope with the United States Postal Service, with the postage fully prepaid.

placed the envelope for collection and mailing, following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service, in a sealed envelope with postage fully prepaid.

I am a resident or employed in the county where the mailing occurred. The envelope or package was placed in the mail at

*(city and state):*

**By overnight delivery.** I enclosed the documents in an envelope or package provided by an overnight delivery carrier and addressed to the persons at the addresses in item 5. I placed the envelope or package for collection and overnight delivery at an office or a regularly utilized drop box of the overnight delivery carrier.

**By messenger service.** I served the documents by placing them in an envelope or package addressed to the persons at the addresses listed in item 5 and providing them to a professional messenger service for service. *(A declaration by the messenger must accompany this Proof of Service or be contained in the Declaration of Messenger below.)*

**By fax transmission.** Based on an agreement of the parties to accept service by fax transmission, I faxed the documents to the persons at the fax numbers listed in item 5. No error was reported by the fax machine that I used. A copy of the record of the fax transmission, which I printed out, is attached.

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 DECLARANT)

(SIGNATURE OF DECLARANT)

*(If item 6d above is checked, the declaration below must be completed or a separate declaration from a messenger must be attached.)*

**DECLARATION OF MESSENGER**

**By personal service.** I personally delivered the envelope or package received from the declarant above to the persons at the addresses listed in item 5. (1) For a party represented by an attorney, delivery was made (a) to the attorney personally; or (b) by leaving the documents at the attorney's office, in an envelope or package clearly labeled to identify the attorney being served, with a receptionist or an individual in charge of the office; or (c) if there was no person in the office with whom the notice or papers could be left, by leaving them in a conspicuous place in the office between the hours of nine in the morning and five in the evening. (2) For a party, delivery was made to the party or by leaving the documents at the party's residence with some person not younger than 18 years of age between the hours of eight in the morning and eight in the evening.

At the time of service, I was over 18 years of age. I am not a party to the above-referenced legal proceeding.

I served the envelope or package, as stated above, on *(date):*

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

(NAME OF DECLARANT) (SIGNATURE OF DECLARANT)

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# PROOF OF SERVICE—CIVIL

**(Proof of Service)**

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**INFORMATION SHEET FOR PROOF OF SERVICE—CIVIL**

*(This information sheet is not part of the official proof of service form and does not need to be copied, served, or filed.)*

# USE OF THIS FORM

This form is designed to be used to show proof of service of documents by (1) personal service, (2) mail, (3) overnight delivery, (4) messenger service, or (5) fax.

This proof of service form should **not** be used to show proof of service of a summons and complaint. For that purpose, use *Proof of Service of Summons* (form POS-010).

Also, this proof of service form should **not** be used to show proof of electronic service. For that purpose, use *Proof of Electronic Service* (form POS-050).

Certain documents must be personally served. For example, an order to show cause and temporary restraining order generally must be served by personal delivery. You must determine whether a document must be personally delivered or can be served by mail or another method.

# GENERAL INSTRUCTIONS

A person must be over 18 years of age to serve the documents. The person who served the documents must complete the Proof of Service. **A party to the action cannot serve the documents**.

The Proof of Service should be typed or printed. If you have Internet access, a fillable version of this proof of service form is available at [*www.courts.ca.gov/forms.htm.*](http://www.courts.ca.gov/forms.htm)

*Complete the top section of the proof of service form as follows:*

First box, left side: In this box print the name, address, and telephone number of the person for whom you served the documents.

Second box, left side: Print the name of the county in which the legal action is filed and the court's address in this box. The address for the court should be the same as the address on the documents that you served.

Third box, left side: Print the names of the plaintiff/petitioner and defendant/respondent in this box. Use the same names as are on the documents that you served.

Fourth box, left side: Check the method of service that was used. You should check only one method of service and should show proof of only one method on the form. If you served a party by several methods, use a separate form to show each method of service.

First box, top of form, right side: Leave this box blank for the court’s use.

Second box, right side: Print the case number in this box. The case number should be the same as the case number on the documents that you served.

Third box, right side: State the judge and department assigned to the case, if known.

*Complete items 1–6:*

1. You are stating that you are over the age of 18.
2. Print your home or business address.
3. If service was by fax service, print the fax number from which service was made.
4. List each document that you served. If you need more space, check the box in item 4, complete the *Attachment to Proof of Service—Civil (Documents Served)* (form POS-040(D)), and attach it to form POS-040.
5. Provide the names, addresses, and other applicable information about the persons served. If more than one person was served, check the box on item 5, complete the *Attachment to Proof of Service—Civil (Persons Served)* (form POS-040(P)), and attach it to form POS-040.
6. Check the box before the method of service that was used, and provide any additional information that is required. The law may require that documents be served in a particular manner (such as by personal delivery) for certain purposes. Service by fax generally requires the prior agreement of the parties.

# You must sign and date the proof of service form. By signing, you are stating under penalty of perjury that the information that you have provided on form POS-040 is true and correct.

POS-040 [Rev.January 1, 2020]

# PROOF OF SERVICE—CIVIL

**(Proof of Service)**

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**For your protection and privacy, please press the Clear This Form button after you have printed the form.**