ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*

—

TELEPHONE NO.: FAX NO. *(Optional):*
E-MAIL ADDRESS *(Optional):*
ATTORNEY FOR *(Name):*

*FOR COURT USE ONLY*

**To keep other people from seeing what you entered on your form, please press the Clear This Form button at the end of the form when finished.**

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF** Inyo
STREET ADDRESS: 168 N. Edwards
MAILING ADDRESS: P.O. Box Drawer U
CITY AND ZIP CODE: Independence, CA 93526
BRANCH NAME:

PETITIONER/PLAINTIFF:

RESPONDENT/DEFENDANT:

OTHER PARENT/PARTY:

CASE NUMBER:

*(If applicable, provide):*
HEARING DATE:
HEARING TIME:
DEPT.:

## PROOF OF SERVICE BY MAIL

**NOTICE: To serve temporary restraining orders you must use personal service (see form FL-330).**

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.

2. My residence or business address is:

3. I served a copy of the following documents *(specify):*
   Responsive Declaration to Request for Order, Income and Expense Declaration

   by enclosing them in an envelope AND
   a. ☑ **depositing** the sealed envelope with the United States Postal Service with the postage fully prepaid.
   b. ☐ **placing** the envelope for collection and mailing on the date and at the place shown in item 4 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.

4. The envelope was addressed and mailed as follows:
   a. Name of person served:
   b. Address:
   c. Date mailed:
   d. Place of mailing *(city and state):*

5. ☐ I served a request to modify a child custody, visitation, or child support judgment or permanent order which included an address verification declaration. *(Declaration Regarding Address Verification—Postjudgment Request to Modify a Child Custody, Visitation, or Child Support Order* (form FL-334) may be used for this purpose.)

6. 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)

(SIGNATURE OF PERSON COMPLETING THIS FORM)



Form Approved for Optional Use
Judicial Council of California
FL-335 [Rev. January 1, 2012]

**PROOF OF SERVICE BY MAIL**

Code of Civil Procedure, §§ 1013, 1013a
*www.courts.ca.gov*

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