

ATTORNEY'S NAME AND ADDRESS:	TELEPHONE NO.:	FOR COURT USE ONLY
ATTORNEY FOR:		
INSERT NAME OF COURT, BRANCH COURT, IF ANY, AND POST OFFICE AND STREET ADDRESS		
PLAINTIFF:		
DEFENDANT:		CASE NUMBER:
DECLARATION OF MAILING OR INABILITY TO ASCERTAIN ADDRESS		

The address of the defendant, respondent or citee _____ (Name)
 having been ascertained during the period of publication of the _____ (Summons or citation)
 ordered by the court, I mailed a copy of the _____ (Documents)
 to the defendant, respondent or citee _____ (Person served)
 at _____ (Address, city and state)
 by United States mail, postage prepaid on _____ (Date) .

During the period of publication of the _____ (Summons or citation)
 ordered by the court, the address of the defendant, respondent or citee _____
 _____ was not ascertained.
 (Name)

I declare under penalty of perjury that the foregoing is true and correct.

Executed on _____ (Date) , _____ (Declarant signature)
 at _____ (Place) , California. _____ (Type or print name)

ACIS Code
37007

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