ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY
Sally Smith	
123 Main Street	
El Cajon, CA 92020	
TELEPHONE NO.: 619-440-4444 FAX NO. (Optional):	
E-MAIL ADDRESS (Optional):	
ATTORNEY FOR (Name): Self-Represented Litigant	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF San Diego	
STREET ADDRESS: 1100 Union Street	
MAILING ADDRESS: Same	
city and zip code: San Diego, CA 92101 Branch Name: Central Division	
PETITIONER: Sally Smith	
RESPONDENT: John Smith	
OTHER PARTY/PARENT:	
	CASE NUMBER:
PROOF OF SERVICE BY POSTING	
 a. Summons (Family Law) (form FL-110) b. Summons (Uniform Parentage—Petition for Custody and Support) (form FL-210) c. Other (specify): 	
 Location where documents were posted: 1100 Union Street, 4th Floor, San Diego, CA 92101 Date when documents were first posted: 03/01/22 	
Date when documents were removed (documents must be posted at least 28 days):	03/31/22
 My Name: Randy Jones My Address: 4320 Spring Street Spring Valley, CA 91977 My Telephone No.: 619-579-1080 I am (specify): a. exempt from registration under Business and Professions Code section 22350(b). b. not a registered California process server. c. a registered California process server: an employee or an independent contractor (1) Registration No.: (2) County: 	
5. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.	
6. I am a California sheriff, marshal, or constable, and I certify that the foregoing is true and correct.	
Date: Date of signing	
Randy Jones	
(NAME OF PERSON WHO SERVED PAPERS) (SIGN	NATURE OF PERSON WHO SERVED PAPERS)

Code of Civil Procedure, §§ 413.30 and 415.50 www.courts.ca.gov