

**Notes On Use:**

**ATTORNEYS SHOULD NOT USE THIS SAMPLE. (Use our Attorney sample instead.)**

**DELETE THIS BOX BEFORE USING. FILL IN ALL MISSING INFORMATION IN THE FORM.**

This declaration is a proof of service by mail by a person who directly deposits the documents in the U.S. mail. (Code Civ. Proc., §§ 1013a(1), 2015.5.) Proof of service by mail may be made by a declaration of a person who deposits a sealed envelope in the mail with postage prepaid. Check the filing requirements for all served documents; this is a SAMPLE ONLY and may not include all required parties to be served.

Re: *[INSERT CASE NAME]*, No. *[INSERT DCA CASE NUMBER]*

**PROOF OF SERVICE BY MAIL**

(Code Civ. Proc., §§ 1013a(1))

I, *[INSERT DECLARANT'S NAME]*, declare as follows:

I am a citizen of the United States, over the age of 18 years and not a party to this cause. My *[RESIDENCE OR BUSINESS]* address is *[INSERT ADDRESS]*, and is located in the county where the mailing described below occurred. My telephone number is *[INSERT TELEPHONE # INCLUDING AREA CODE OR STATE INSTEAD: "I do not have a telephone number."]*

I served the following document(s):

*[INSERT NAME OF DOCUMENT, EXAMPLE: "APPELLANT'S OPENING BRIEF"]*  
by placing a true copy thereof in a sealed envelope, with postage fully prepaid, and deposited the envelope in the United States mail at *[INSERT TOWN]*. The envelopes were addressed to the person(s) named below at the address(es) shown: *[LIST BELOW THE NAME AND ADDRESS OF EACH PERSON OR ENTITY SERVED, FOR EXAMPLE:]*

**Office of the Attorney General**

P.O. Box 944255  
Sacramento, CA 94244-2550  
Attorney for Respondent  
State of California

**Office of the Clerk**

*[NAME] County Superior Court*  
*[INSERT COURT'S ADDRESS]*

**Central Calif. Appellate Program**

2150 River Plaza Dr., Ste. 300  
Sacramento, CA 95833

**Office of the District Attorney**

*[COUNTY NAME] County*  
*[INSERT D.A.'S ADDRESS]*

**APPOINTED COUNSEL'S NAME**

*[INSERT ATTORNEY'S ADDRESS]*

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on *[DATE]*, at *[TOWN]*, California.

\_\_\_\_\_  
*[Signature line]*  
*[TYPED NAME OF DECLARANT]*