Attorney(s) for _____

Space above for Name, Address and Telephone No. of Attorney(s)

Space above for use of Court Clerk only

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN JOAQUIN

Case Number

DECLARATION OF MAILING OR OF INABILITY TO ASCERTAIN ADDRESS

☐ The address of the defendant _____ having been ascertained during the period of publication of the summons ordered by the court, I mailed a copy of the summons and the complaint to the defendant _____ _____ at _____ _____ by United States mail, postage prepaid on _____

☐ During the period of publication of the summons ordered by the court, the address of the defendant _____ was not ascertained.

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

Executed on _____

at _____, California.

_____
(Signature)

_____
(Type or print name)