

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ Ref. No. or File No.: _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
WORKERS COMPENSATION APPEALS BOARD STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
APPLICANT: DEFENDANT / RESPONDENT:	
PROOF OF SERVICE OF SPECIAL NOTICE OF LAWSUIT	CASE NUMBER:

1. At the time of service I was at least 18 years of age and not a party to this action.

2. I served copies of the special notice of lawsuit

- a. Application For Adjudication
- b. Alternative Dispute Resolution (ADR) package
- c. Civil Case Cover Sheet (*served in complex cases only*)
- d. cross-complaint
- e. other (*specify documents*):

3. a. Party served (*Specify name of party as shown on document served*):

b. Person served: party in item 3a Other (*specify name and relationship to the party named in item 3a*):

4. Address where the party was served:

5. I served the party (*check proper box*):

- a. **by personal service.** I personally delivered the documents listed in item 2 to the party or person authorized to service of process for the party (1) on (date): _____ (2) at (time): _____
- b. **by substituted service.** on (date): _____ at (time): _____ I left the documents listed in item 2 or in the presence of (name and title or relationship to the person indicated in item 3b):

- (1) **(business)** a person at least 18 years of age apparently in charge at the office or usual place of business of the party. I informed him or her of the general nature of the papers.
- (2) **(home)** a competent member of the household (at least 18 years of age) at the dwelling house or usual place of abode of the respondent. I informed him or her of the general nature of the papers.
- (3) **(physical address unknown)** a person at least 18 years of age apparently in charge at the usual mailing address of the person to be served, other than a United States Postal Service post office box. I informed him or her of the general nature of the papers.
- (4) I thereafter mailed (by first-class, postage prepaid) copies of the documents to the person to be served at the place where the copies were left (Code Civ. Proc., § 415.20). I mailed the documents on (date): _____ from (city): _____ or a declaration of mailing is attached.
- (5) I attach a **declaration of diligence** stating actions taken first to attempt personal service.

PLAINTIFF / PETITIONER:	CASE NUMBER:
DEFENDANT / RESPONDENT:	

- c. **by mail and acknowledgement service.** I mailed the documents listed in item 3 to the party, to the address shown in item 4, by first-class mail, postage prepaid,
- (1) on (date): _____ (2) from (city): _____
- (3) with two copies of the Notice and Acknowledgment of Receipt (form 982(a)(4)) and a postage-paid return envelope addressed to me. (Attach completed Notice and Acknowledgment of Receipt (form 982(a)(4).) (Code Civ. Procedure, § 415.30)
- (4) to an address outside California (by registered or certified mail with return receipt requested) (Attach signed return receipt or other evidence of actual delivery to the respondent.) (Code Civ. Procedure, § 415.40)
- d. **by other legal means** (specify code section):

Additional page describing service is attached.

6. The "Notice of Person Served" (on the summons) was completed as follows:

- a. as an individual defendant.
- b. as the person sued under the fictitious name of (specify):
- c. On behalf of (specify):

under the following code of Civil Procedure section:

- | | |
|---|---|
| <input type="checkbox"/> 416.1 0 (corporation) | <input type="checkbox"/> 415.95 (business organization, form unknown) |
| <input type="checkbox"/> 416.20 (defunct corporation) | <input type="checkbox"/> 416.60 (minor) |
| <input type="checkbox"/> 416.30 (joint stock company/association) | <input type="checkbox"/> 416.70 (conservatee) |
| <input type="checkbox"/> 416.40 (association or partnership) | <input type="checkbox"/> 416.90 (individual) |
| <input type="checkbox"/> 416.50 (public entity) | <input type="checkbox"/> 415.46 (occupant) |
| <input type="checkbox"/> other: | |

7. **Person who served papers**

- a. Name:
- b. Address:
- c. Telephone number:
- d. **The fee** for service was: \$
- e. I am:
- (1) Exempt from registration under Business and Professions Code section 22350(b).
- (2) Not a registered California process server.
- (3) Registered California process server.
- (i) Employee or independent contractor.
- (ii) Registration no.:
- (iii) County:

8. **I declare** under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

or

9. **I am a California sheriff, marshal, or constable and** I certify that the foregoing is true and correct.

Date:

(NAME OF PERSON WHO SERVED PAPERS)		(SIGNATURE OF PERSON WHO SERVED PAPERS)
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