

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)