

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):

TELEPHONE NO.:

FAX NO.:

ATTORNEY FOR (Name)

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN JOAQUIN

LODI BRANCH
315 W. ELM ST.
LODI, CA 95240

MANTECA BRANCH
315 E. CENTER ST.
MANTECA, CA 95336

STOCKTON BRANCH
222 E. WEBER AVE., RM. 303
STOCKTON, CA 95202

TRACY BRANCH
475 E. TENTH ST.
TRACY, CA 95376

vs.

Plaintiff(s),

Defendant(s).

Case No.

**DECLARATION OF SERVICE ON
SMALL CLAIMS JOINT DEBTOR
PROCEEDINGS**

I, the undersigned, say:

I was at the time of the service of the papers hereinafter referred to, over the age of eighteen years and not a party to this action; that I served the Order to Appear (Joint Debtor), a copy of the Declaration in Joint Debtor Proceedings and a copy of the Claim of Plaintiff and Order in this action by personally delivering to and leaving with the following persons on the date and at the place set forth opposite their respective names:

Name of Party Served

Date of Service

Place of Service

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

Executed on

(DATE)

at

(CITY)

, California

X _____

SERVER

ADDRESS OF SERVER

Fee for Service \$