Attorney or Party without an Attorney **NAME:** **ADDRESS:** **CITY, STATE, ZIP CODE:** **TELEPHONE NO:**	
SAN JOAQUIN SUPERIOR COURT, _____ BRANCH STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP:	
THE PEOPLE OF THE STATE OF CALIFORNIA **Vs** **Defendant**	COURT CASE NO.:

PROOF OF SERVICE

1. At the time of the service I was at least 18 years of age.

2. I served copies of the **Petition for Dismissal – CR 180**

3. Party Served: **San Joaquin County District Attorney**

4. Address where party was served: **222 E Weber Ave., Room 202**
   Stockton CA 95202

5. The documents were served by the following means *(specify)*

   a. ☐ **By personal service.** I personally delivered the documents to the persons at the address listed in item 5. Delivery was made to the attorney's office by leaving the documents with the receptionist.

   b. ☐ **By United States mail.** I enclosed the documents in a sealed envelope or package addressed to the persons at the address in item 5 and deposited the sealed envelope with the United States Postal Service, with the postage fully prepaid. I am a resident in the county where the mailing occurred. The envelope or package was placed in the mail at *(city and state)*_____
   _____.

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

Date:

_____ _____

(NAME OF DECLARANT) (SIGNATURE OF DECLARANT)