



**San Manuel Tribal Court**  
San Manuel Indian Reservation  
3214 Victoria Avenue  
Highland, CA 92346  
Phone: (909) 907-6920

**PROOF OF SERVICE — CIVIL**

|  |                                       |  |
|--|---------------------------------------|--|
| 1. Attorney or Party Without Attorney      Tribal Bar No.:             |                                       | <i>For Court Use Only</i>                      |
| Name:  |                                       |  |
| Firm Name:   |                                       |  |
| Street Address:  |                                       |  |
| City:  | State:                      Zip Code: |  |
| Telephone No.:   | Fax No.:                              |  |
| Email Address:   |                                       | 5. Case Number:                                |
| Attorney/Advocate For (name):  |                                       | 6. Hearing Date:                               |
|  |                                       | Time:  |
| 2. SAN MANUEL TRIBAL COURT<br>3214 Victoria Avenue, Highland, CA 92346 |                                       |  |
| 3. Plaintiff/Petitioner:   |                                       |  |
| Defendant/Respondent:  |                                       |  |
| 4. PROOF OF SERVICE — CIVIL  |                                       |  |
| Check method of service ( <i>only one</i> ):                           |                                       |  |
| <input type="checkbox"/> By Personal Service                           | <input type="checkbox"/> By Mail      | <input type="checkbox"/> By Overnight Delivery |
| <input type="checkbox"/> By Messenger Service                          | <input type="checkbox"/> By Fax       | <input type="checkbox"/> By Email              |

Case Name: \_\_\_\_\_

Case Number: \_\_\_\_\_

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

2. My residence or business address is:

3. On (date): \_\_\_\_\_ I served the following documents (*specify*):

4. I served the documents on the person or persons below, as follows:

a. Name of person served:

b.  (*Complete if service was by personal service, mail, overnight delivery, messenger service, or email.*)

Business, residential, or email address where person was served:

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

a.  **By personal service.** I personally delivered the documents to the persons at the addresses listed in item 3 (1) For a party represented by an attorney, delivery was made (a) to the attorney personally; or (b) by leaving the documents at the attorney's office, in an envelope or package clearly labeled to identify the attorney being served, with a receptionist or an individual in charge of the office; or (c) if there was no person in the office with whom the notice or papers could be left, by leaving them in a conspicuous place in the office between the hours of nine in the morning and five in the evening. (2) For a party, delivery was made to the party or by leaving the documents at the party's residence with some person not younger than 18 years of age between the hours of eight in the morning and six in the evening.

b. **By United States mail.** I enclosed the documents in a sealed envelope or package addressed to the persons at the addresses in item 4 and (*specify one*):

(1) deposited the sealed envelope with the United States Postal Service, with the postage fully prepaid.

(2) placed the envelope for collection and mailing, following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service, in a sealed envelope with postage fully prepaid.

c. **By overnight delivery.** I enclosed the documents in an envelope or package provided by an overnight delivery carrier and addressed to the persons at the addresses in item 5. I placed the envelope or package for collection and overnight delivery at an office or a regularly utilized drop box of the overnight delivery carrier.

d. **By messenger service.** I served the documents by placing them in an envelope or package addressed to the persons at the addresses listed in item 5 and providing them to a professional messenger service for service. (*A declaration by the messenger must accompany this Proof of Service.*)

e. **By fax transmission.** Based on an agreement of the parties to accept service by fax transmission, I faxed the documents to the persons at the fax numbers listed in item 4. No error was reported by the fax machine that I used. A copy of the record of the fax transmission, which I printed out, is attached.

f. **By email.** Based on an agreement of the parties to accept service by email, I emailed the documents to the persons at the email address listed in item 4. No error was reported by the email service that I used. A copy of the record of the email, which I printed out, is attached.

I declare under the laws of the San Manuel Band of Mission Indians that the foregoing is true and correct.

\_\_\_\_\_  
Type or Print Name of Declarant

\_\_\_\_\_  
Signature of Declarant

## SAN MANUEL TRIBAL COURT INFORMATION SHEET FOR PROOF OF SERVICE — CIVIL

(This information sheet is not part of the official proof of service form and does not need to be copied, served, or filed.)

### USE OF THIS FORM

This form is designed to be used to show proof of service of documents by (1) personal service, (2) mail, (3) overnight delivery, or (4) messenger service. This proof of service form may also be used to show proof of service for gaming commission disputes.

### GENERAL INSTRUCTIONS

A person must be over 18 years of age to serve the documents. The person who served the documents must complete the Proof of Service. A party to the action cannot serve the documents.

The Proof of Service should be typed or printed. If you have Internet access, a fillable version of this proof of service form is available at [www.sanmanuel-nsn.gov/Tribal-Government/Tribal-Court](http://www.sanmanuel-nsn.gov/Tribal-Government/Tribal-Court)

Complete the top section of the proof of service form as follows. Complete items:

1. In this box, print your name, address, and telephone number. If you are being represented by an attorney, list his/her name and San Manuel Tribal Bar number.
2. Print the court's address in this box.
3. Print the names of the plaintiff/petitioner and defendant/respondent in this box. Use the same names as are on the documents that you served.
4. Check the method of service that was used. You should check only one method of service and should show proof of only one method on the form. If you served a party by several methods, use a separate form to show each method of service.
5. Print the case number in this box. The case number should be the same as the case number on the documents that you served.
6. Print the hearing date (if available) and time.
7. First box, top of form, right side: Leave this box blank for the court's use.

Complete items 1-5 on page 2:

Print case name and case number at the top of the page.

1. You are stating that you are over the age of 18.
2. Print your home, business, or email address.
3. Provide the date the documents were served. List each document that you served. If you need more space, attach a document named "*Proof of Service—Civil (Documents Served)*" and attach it to form POS-001.
4. Provide the names, addresses, and other applicable information about the persons served. If more than one person was served, use a separate proof of service form.
  - a. Name of person served.
  - b. Address of where person was served.
5. Check the box before the method of service that was used, and provide any additional information that is required. The law may require that documents be served in a particular manner (such as by personal delivery) for certain purposes.

**You must sign and date the proof of service form. By signing, you are stating under penalty of perjury that the information that you have provided on form POS-001 is true and correct.**