

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	FOR COURT USE ONLY For your protection and privacy, please press the Clear This Form button after you are done printing this form.
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE JUSTICE CENTER: <input type="checkbox"/> Central - 700 Civic Center Dr. West, Santa Ana, CA 92701-4045 <input type="checkbox"/> Civil Complex Center - 751 W. Santa Ana Blvd., Santa Ana, CA 92701-4512 <input type="checkbox"/> Harbor-Newport Beach Facility- 4601 Jamboree Rd., Newport Beach, CA 92660-2595 <input type="checkbox"/> Lamoreaux - 341 The City Drive, Orange, CA 92868-3205 <input type="checkbox"/> North - 1275 N. Berkeley Ave., P. O. Box 5000, Fullerton, CA 92838-0500 <input type="checkbox"/> West - 8141 13 th Street, Westminster, CA 92683-4593	
PLAINTIFF: DEFENDANT:	CASE NUMBER:
CERTIFICATE OF DUE DILIGENCE	Case assigned to: Judge: Department: Date complaint filed: Hearing/trial date:

I certify that I am and was on the dates herein mentioned, over the age of 18 years and not a party to the action. After due and diligent effort, I have been unable to effect personal service on the within-named defendant(s):

due to the following reasons: *(If additional space is needed, attach separate page(s) and indicate the number of pages attached.)*

<u>Residence Address</u>	<u>Date and Time Service Attempted</u>	<u>Reason for Non-Service</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

<u>Business Address</u>	<u>Date and Time Service Attempted</u>	<u>Reason for Non-Service</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

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

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF DECLARANT)

CERTIFICATE OF DUE DILIGENCE

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