



IN THE WILTON RANCHERIA COURTS
WILTON RANCHERIA



FIRST AND LAST NAME OF THE PERSON WHO SERVED: STREET ADDRESS: CITY: STATE: ZIP CODE: PHONE: EMAIL: ATTORNEY FOR (<i>Full name</i>): TRIBAL BAR NO.:	FOR COURT USE ONLY
	CASE NO:
	PARTY 1 / PETITIONER:
	PARTY 2 / RESPONDENT:
WILTON RANCHERIA TRIBAL COURT 9245 LAGUNA SPRINGS DRIVE, SUITE 110 ELK GROVE, CA 95758 tribalcourtinfo@wiltonrancheria-nsn.gov 916.683.6000 ext.1002	
PROOF OF SERVICE	
TYPE OR PRINT USING BLACK OR BLUE INK.	

PERSONAL SERVICE REQUIRES: "1. LEAVE A COPY WITH THE PARTY WHEREVER THE PARTY IS LOCATED; OR 2. LEAVING A COPY WITH ANY PERSON AT LEAST AGE SIXTEEN (16) AT THE PARTY'S HOME OR PLACE OF WORK; OR 3. LEAVING A COPY WITH THE PERSON DESIGNATED BY TRIBAL LAW TO RECEIVE LEGAL DOCUMENTS WHEN THE PARTY IS THE TRIBE OR ANY OF ITS INSTRUMENTALITIES; OR 4. WHEN THE PARTY IS A COMPANY, CORPORATION, OR BUSINESS, LEAVING A COPY WITH THE PRESIDENT OR OTHER HEAD OF THE COMPANY OR CORPORATION, SECRETARY, CASHIER, MANAGING AGENT OF THE COMPANY OR CORPORATION OR BRANCH OR LOCAL OFFICE, OR TO THE SECRETARY OR OFFICE ASSISTANT OF SUCH INDIVIDUALS." THE PARTY MAY OBTAIN THE SERVICE OF A PROFESSIONAL PROCESS SERVER AT THEIR OWN EXPENSE AND EFFORT. (10 WRC § 2-406)
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I am serving the document(s) listed below **on behalf of** _____,
☐ PARTY 1 / PETITIONER ☐ PARTY 2 / RESPONDENT ☐ INTERESTED PARTY in the above-named matter.



CASE NO.:

1. TYPE OF DOCUMENTS SERVED

I served the **following document(s)** (*Check all that apply*):

☐ PETITION FOR:

☐ SUMMONS

☐ MOTION FOR:

☐ OTHER:

2. TYPE OF SERVICE

I served these document(s) by (*If you attempted service at least twice and were unsuccessful, skip this item and move to item 3.*):

a. ☐ **Personal Service.** I personally handed the document(s) to the person listed below.

b. ☐ **United States Mail.** I enclosed the document(s) in a sealed envelope addressed to the person at the address listed below and (*specify one*):

☐ deposited the sealed envelope with the United States Postal Service, with the postage fully prepaid.

☐ placed the sealed envelope for collection and mailing, following our ordinary business practices.

c. ☐ **Certified Mail.** I enclosed the document(s) in a sealed envelope addressed to the person at the address listed below and sent it by certified mail with return receipt requested. (☐ Receipt is attached).

d. ☐ **Messenger service.** I enclosed the document(s) in a sealed envelope addressed to the person at the address listed below and provided it to a professional messenger service for service. (A declaration by the messenger must be contained in the *Declaration of Messenger* on page 3.)

e. ☐ **On Agent.** I hand delivered the document(s) to the person designated by Tribal law to receive legal documents when the Party is the Tribe or any of its instrumentalities.

f. ☐ **Email.** I emailed the document(s) to the person listed below.

(*EMAIL IS ONLY FOR SERVICE OF DOCUMENTS AFTER FIRST PAPERS IF AGREED TO BY THE PARTIES. 10 WRC § 2-407*)

Fill in the information below if you checked any box in item 3 (a-f).

ADDRESSED TO: (<i>Full Name</i>)	RELATIONSHIP TO THE MATTER:
LEFT WITH THIS PERSON: (<i>First and Last Name if different than above</i>)	
RELATIONSHIP TO PERSON BEING SERVED (<i>for example: spouse, friend, roommate, etc.</i>):	
ON THIS DATE: (<i>MM/DD/YYYY</i>)	AT THIS TIME: ☐ AM ☐ PM



CASE NO.:

FULL ADDRESS OF SERVICE: <i>(Number and Street Name, City, State, Zip)</i>	
SENT TO THIS EMAIL ADDRESS:	SENT FROM THIS EMAIL ADDRESS:

3. ATTEMPTED SERVICE

*(Complete this item **only** if you attempted service at least twice and were unsuccessful.)*

I, *(full name of person who attempted to serve)* _____,

declare that I have tried to serve *(full name of person who was to be served)*

_____ without success. I have tried to personally serve the document(s) *at least twice*; the information for those attempts is as follows:

Attempt #1

DATE OF ATTEMPT: <i>(MM/DD/YYYY)</i>	AT THIS TIME: ☐ AM ☐ PM
FULL ADDRESS OF ATTEMPTED SERVICE:	RESULT:

Attempt #2

DATE OF ATTEMPT: <i>(MM/DD/YYYY)</i>	AT THIS TIME: ☐ AM ☐ PM
FULL ADDRESS OF ATTEMPTED SERVICE:	RESULT:

4. At the time of service, I was **over 18 years of age and**

☐ I am **not a party** to this action.

☐ I **am a party** to this action; I am ☐ Party 1. ☐ Party 2. ☐ Interested Party.

PETITIONS, SUMMONS, AND NOTICE OF HEARINGS MUST BE SERVED BY SOMEONE <u>WHO IS NOT A PARTY</u> TO THE CASE.

CERTIFICATION

I certify, under penalty of perjury under the laws of Wilton Rancheria and the State of California, that the foregoing statement and all attachments are true and correct to the best of my knowledge and belief.

TYPED / PRINTED NAME:	SIGNATURE:	DATE:
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CASE NO.:

DECLARATION OF MESSENGER

*(**Only** complete this item if you checked item 3(d).)*

☐ **PERSONAL SERVICE.** I personally delivered the sealed envelope received from the declarant above to the person at the address listed in item 6. (1) For a party represented by an attorney, delivery was made to (a) the attorney personally; or (b) by leaving the document(s) at the attorney's office, in an envelope clearly labeled to identify the attorney being served, with a receptionist or individual in charge of the office. (2) For a party, delivery was made to the party wherever the party was located or by leaving the document(s) at the party's home or place of work with any person at least age 16 or older.

TYPED / PRINTED NAME:	SIGNATURE:	DATE: