AT	FORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):	FOR COURT USE ONLY	
	TELEPHONE NO.: FAX NO. (Optional):		
E	MAIL ADDRESS (Optional):		
	ATTORNEY FOR (Name):		
S	UPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101		
GL	JARDIANSHIP OF:		
	PROOF OF PERSONAL SERVICE (GUARDIANSHIP)	CASE NUMBER	
ı	, declare	a:	
., _ 1	At the time of service I was at least 18 years of age and not a party to this case		
	• • • • • • • • • • • • • • • • • • • •		
	I am a resident of or employed in the county where service occurred.		
3.	My business or residence address is:		
4.	I served copies of the following paper(s) for the TEMPORARY Guardianship	set for hearing on:	
	Date: Time:		
	Address of court same as noted above is (specify):		
	☐ Petition for Appointment of Temporary Guardian of the Person (JC Form	#GC-110(P))	
	Notice of Hearing – Guardianship or Conservatorship (JC Form #GC-020)	
	Other (list exact titles of paper(s) served):		
	I served copies of the following paper(s) for the GENERAL Guardianship set	for hearing on:	
	Date: Time:	-	
	Address of court same as noted above is (specify):		
	☐ Petition for Appointment of Guardian of Minor (JC Form #GC-210/210(P)		
	☐ Guardianship Petition – Child Information Attachment (JC Form #GC-210	(CA))	
	Notice of Hearing – Guardianship or Conservatorship (JC Form #GC-020)	
	Notice of Case Assignment (SDSC Form #PR-156)Comparison of Guardians With Other Nonparent Caregivers (JC Form #G	C-207-INFO/ IV-352-INFO)	
	Other (list exact titles of paper(s) served):	70-207-IIVI 0/0V-032-IIVI 0)	
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5.	I personally delivered these papers to		
	(a) Name of person served:		
	(b) Address where served:		
	(c) Date served: Time served:		
I de	eclare under penalty of perjury under the laws of the State of California that the	toregoing is true and correct.	
Da	te:		
Ty	pe or print name	Signatur	