

**Practice tip:** See [E-service page of ADI website](#) for directions on which parties must be served electronically.

**Practice tip:** See [Filing and Service pages](#) of the ADI website for required service for various kinds of documents.

[ATTORNEY NAME, BAR #]  
[ATTORNEY FIRM]  
[FIRM ADDRESS]  
[TELEPHONE]

**Proof of Service**

[CASE NAME]

Court of Appeal No.: [CASE #]

[SPECIFIC COUNTY] Superior Court No.: [CASE #]

I, the undersigned, declare that I am over 18 years of age, employed in the County of San Diego, and not a party to the instant action. My business address is listed above. My electronic service address is [ELECTRONIC ADDRESS]. I served the attached **APPELLANT'S [SPECIFIC DOCUMENT SERVED]** as follows:

**USPS:** By placing copies of the [DOCUMENT] in a sealed envelope, with the correct postage, and depositing them in the United States Postal Service, to each of the following persons at the following addresses on [DATE]:

[CLIENT]  
[address of record]

[SUPERIOR COURT]\*  
[address]

[TRIAL COUNSEL for client]\*  
[address of record]

[DISTRICT ATTORNEY]\*  
[address]

\*Unless e-service is required.

**ELECTRONIC SERVICE:** By sending from my electronic service address of [SERVER'S EMAIL ADDRESS], on [DATE] at [TIME], the above named document to each of the following persons at the following authorized email service addresses:

APPELLATE DEFENDERS, INC.  
[eservice-criminal@adi-sandiego.com](mailto:eservice-criminal@adi-sandiego.com)

ATTORNEY GENERAL'S OFFICE  
[SDAG.Docketing@doj.ca.gov](mailto:SDAG.Docketing@doj.ca.gov).

[APPOINTED APPELLATE  
COUNSEL for codefendant(s)]  
(email address(es))

[OTHER, as permitted]

I additionally declare that I electronically submitted a copy of this document to the Court of Appeal on its website at <http://www.courts.ca.gov/4dca-esub.htm>, in compliance with the court's Terms of Use.

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

Executed on [DATE]

---

[SIGNATURE]

[TYPE NAME OF PERSON SERVING]