

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

HEMET 880 N. State St., Hemet, CA 92543
 INDIO 46-200 Oasis St., Indio, CA 92201

RIVERSIDE 4175 Main St., Riverside, CA 92501

RI-A836B

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar Number and Address</i>):</p> <p>TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____</p>	<p style="text-align: center;"><i>FOR COURT USE ONLY</i></p> <p>CASE NUMBER: _____</p>
<p>NOTICE OF ALLEGED PATERNITY</p>	

To: _____ alleged natural father:

1. PLEASE TAKE NOTICE that it is alleged that you are, or could be, the natural father of _____ born on _____ to _____ (Mother), or expected to be born on _____ to _____ (Mother).

2. TAKE FURTHER NOTICE that: Your failure to bring an action within 30 days after the birth of this said child or service of this notice upon you, whichever last occurs, for the purpose of declaring that you are the father of the above mentioned child may result in the child's being legally adopted by others without further notice to you.

(DATE)

(TYPE OR PRINT NAME OF ATTORNEY PARTY MAKING DECLARATION)



(SIGNATURE)

PROOF OF SERVICE OF CITATION ADOPTION
(Use separate proof of service for each person served)

1. I served the person cited (name): _____
With the citation and petition as follows: _____
- a. by serving
1. Person cited.
2. Person and title or relationship to person cited (name etc):
- b. Delivery at home business
1. Date: _____ 2. Time: _____
3. Address: _____
- c. Mailing: 1. Date: _____ 2. Place: _____
3. Address: _____
2. Manner of service: (check proper box)
- a. (Personal Service) By personally delivering Copies (CCP 415.10).
- b. (Substituted service on corporation, unincorporated association (including partnership), or public entity).
By leaving, during usual business hours, copies in the office of the person cited with (name): _____ and thereafter mailing,
by first-class mail, postage prepaid, copies to the person cited at the place where the copies were left (CCP 415.20(a)).
- c. (Substituted service on natural person, minor, incompetent or candidate). By leaving copies at the
 dwelling house usual place abode usual place of business of the person cited in
the presence of (name): _____ who was informed of the
general nature of the papers, and thereafter mailing by first class mail, postage prepaid, copies to the
person cited at the place where the copies were left (CCP 415.20(b)). (Attach separate declaration or
affidavit stating acts relied on to establish reasonable diligence in first attempting personal service.)
- d. (Mail and acknowledgment service). By mailing by first-class mail copies to the person cited together with
two copies of the form Notice and Acknowledgment of Receipt and a return envelope, postage,
prepaid, addressed to the sender (CCP 415.30). (Attach completed Acknowledgment of Receipt form.)
- e. (Return receipt requested mail service). By mailing to address outside California, with return receipt
requested, copies to the person cited (CCP 415.40) (Attach signed return receipt or other evidence of
actual delivery to the person served.)
- f. (Other-CCP 413.10. 413.30. Attach separate page if necessary):
 Additional page is attached.
3. On the copy of the citation served the NOTICE TO THE PERSON SERVED was completed as follows (CCP 412.30), 415.10, AND 474):
- a. As an individual:
- b. As the person cited under the fictitious name of : _____
- c. On behalf of:
Under: CCP 416.10 (Corporation) CCP 416.60 (Minor) Other:
 CCP 416.20 (Defunct corporation)
 CCP 416.40 (Association or partnership) CCP 416.90 (Individual)
- d. By personal delivery on (date): _____

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4. At the time of service I was at least 18 years of age and not a party to this action.
5. Fee for service: \$ _____
6. Name, address and telephone number of person serving: _____
- a. Not a registered California process server (CCP 417.40) and exempt (Bus & P Code 22350).
- b. Registered: _____ County, Number: _____
- c. California sheriff, marshal or constable
1. Title: _____ 2. County: _____
3. Municipal or Justice Court District: _____

I declare under penalty of perjury that the foregoing is true and correct and that this declaration is executed on (date): _____ at (place): _____ California.

I certify that the foregoing is true and correct and that this certificate is executed on (date): _____ at (place): _____ , California.

(SIGNATURE)

(SIGNATURE)

The declaration under penalty of perjury must be served in California, or in a state that authorized use of the declaration in place of an affidavit, otherwise an affidavit is required.