

State of California County of Los Angeles Term of Registration 2 years	(File Stamp)
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CERTIFICATE OF REGISTRATION AS A PROCESS SERVER

California Business & Professions Code Section 22350, 22351(a), et seq.

The undersigned individual declares that:

Name: _____
Address: _____
Age: _____ Telephone: _____
Email: _____

The filing of this registration in the County of Los Angeles is appropriate because my
 residence or principal place of business is located in the County.

Have you been a resident of California for at least one year immediately preceding the filing of this certificate?	() YES	() NO
Have you ever been convicted of a Felony? If yes, attach a copy of a certificate of rehabilitation, expungement or pardon.	() YES	() NO
Will you perform the duties of a process server in compliance with the provision of the law governing the service of process in the State of California?	() YES	() NO

The undersigned declares under the penalty of perjury under the laws of the State of California that the foregoing is true and correct:

Date: _____ Signature: _____

For Official Use Only:	Expiration Date: _____
Permanent ID Card mailed: _____	Registration# _____