

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) <b>C.D. MICHEL   SBN: 144258</b> <b>MICHEL &amp; ASSOCIATES, P.C.</b> <b>180 EAST OCEAN BLVD., SUITE 200</b> <b>LONG BEACH, CA 90802</b> <b>TELEPHONE NO.: (562) 216-4444   FAX NO.   E-MAIL ADDRESS (Optional):</b> <b>ATTORNEY FOR (Name): :</b>	<b>E-FILED</b> <b>9/20/2017 2:36 PM</b> <b>FRESNO COUNTY SUPERIOR COURT</b> <b>By: L Peterson, Deputy</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF FRESNO</b>  <b>STREET ADDRESS: 1130 "O" STREET</b>  <b>MAILING ADDRESS:</b>  <b>CITY AND ZIP CODE: FRESNO, CA 93721</b>  <b>BRANCH NAME:</b>	
<b>PLAINTIFF/PETITIONER: DANNY VILLANUEVA, ET AL.</b>  <b>DEFENDANT/RESPONDENT: XAVIER BECERRA, ETC., ET AL.</b>	<b>CASE NUMBER:</b> <b>17CECG03093</b>
<b>PROOF OF SERVICE OF SUMMONS</b>	<b>Ref. No. or File No.: 2155</b>

*(Separate proof of service is required for each party served.)*

1. At the time of service I was at least 18 years of age and not a party to this action.

2. I served copies of:

- a. ☒ Summons
- b. ☒ Complaint
- c. ☐ Alternative Dispute Resolution (ADR) package
- d. ☒ Civil Case Cover Sheet
- e. ☐ Cross-complaint
- f. ☒ other (specify documents): NOTICE OF CASE MANAGEMENT CONFERENCE AND ASSIGNMENT OF JUDGE FOR ALL PURPOSES

3. a. Party served (specify name of party as shown on documents served):

**XAVIER BECERRA, IN HIS OFFICIAL CAPACITY AS ATTORNEY GENERAL FOR THE STATE OF CALIFORNIA**

- b. ☒ Person (other than the party in item 3a) served on behalf of an entity or as an authorized agent (and not a person under item 5b on whom substituted service was made) (specify name and relationship to the party named in item 3a):

**B. YOURCZEK - OFFICER, AUTHORIZED TO ACCEPT**

Age: 50 yrs.      Weight: 170 lbs.      Hair: Bald      Sex: Male  
 Height: 5 ft. 10 ft.      Eyes: Blue      Race: Caucasian

4. Address where the party was served: **1300 I STREET**  
**SACRAMENTO, CA 95814**

5. I served the party (check proper box)

- a. ☒ by personal service. I personally delivered the documents listed in item 2 to the party or person authorized to receive service of process for the party (1) on (date): **09/14/2017** (2) at (time): **09:24 am**

- b. ☐ by substituted service. On (date): at (time): I left the documents listed in item 2 with or in the presence of (name and title or relationship to person indicated in item 3b):

- (1) ☐ (business) a person at least 18 years of age apparently in charge at the office or usual place of business of the person to be served. I informed him or her of the general nature of the papers.
- (2) ☐ (home) a competent member of the household (at least 18 years of age) at the dwelling house or usual place of abode of the party. I informed him or her of the general nature of the papers.
- (3) ☐ (physical address unknown) a person at least 18 years of age apparently in charge at the usual mailing address of the person to be served, other than a United States Postal Service post office box. I informed him or her of the general nature of the papers.
- (4) ☐ I thereafter mailed (by first-class, postage prepaid) copies of the documents to the person to be served at the place where the copies were left (Code Civ. Proc., §415.20). I mailed the documents on (date): from (city): or ☐ a declaration of mailing is attached.
- (5) ☐ I attach a declaration of diligence stating actions taken first to attempt personal service.

PETITIONER: DANNY VILLANUEVA, ET AL.

CASE NUMBER:

RESPONDENT: XAVIER BECERRA, ETC., ET AL.

17CECG03093

- c. ☐ by mail and acknowledgment of receipt of service. I mailed the documents listed in item 2 to the party, to the address shown in item 4, by first-class mail, postage prepaid,
- (1) on (date): (2) from (city):
- (3) ☐ with two copies of the *Notice and Acknowledgment of Receipt* and a postage-paid return envelope addressed to me. (Attach completed *Notice and Acknowledgment of Receipt*.) (Code Civ. Proc., § 415.30.)
- (4) ☐ to an address outside California with return receipt requested. (Code Civ. Proc., § 415.40.)
- d. ☐ by other means (specify means of service and authorizing code section):

☐ Additional page describing service is attached.

6. The "Notice to the Person Served" (on the summons) was completed as follows:

- a. ☒ as an individual defendant.
- b. ☐ as the person sued under the fictitious name of (specify):
- c. ☐ as occupant.
- d. ☒ On behalf of (specify): **XAVIER BECERRA, IN HIS OFFICIAL CAPACITY AS ATTORNEY GENERAL FOR THE STATE OF CALIFORNIA**

under the following Code of Civil Procedure section:

- |                                                                   |                                                                       |
|-------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> 416.10 (corporation)                     | <input type="checkbox"/> 415.95 (business organization, form unknown) |
| <input type="checkbox"/> 416.20 (defunct corporation)             | <input type="checkbox"/> 416.60 (minor)                               |
| <input type="checkbox"/> 416.30 (joint stock company/association) | <input type="checkbox"/> 416.70 (ward or conservatee)                 |
| <input type="checkbox"/> 416.40 (association or partnership)      | <input checked="" type="checkbox"/> 416.90 (authorized person)        |
| <input type="checkbox"/> 416.50 (public entity)                   | <input type="checkbox"/> 415.46 (occupant)                            |
|                                                                   | <input type="checkbox"/> other:                                       |

7. Person who served papers

- a. Name: **GREGORY CHOW C/O Nationwide Legal, LLC (12-234648)**
- b. Address: **1609 James M. Wood Blvd., 2nd Fl Los Angeles, CA 90015**
- c. Telephone number: **(213) 249-9999**
- d. The fee for service was:
- e. I am:

- (1) ☐ not a registered California process server.
- (2) ☐ exempt from registration under Business and Professions Code section 22350(b).
- (3) ☒ registered California process server:
- (i) ☐ owner ☒ employee ☐ independent contractor.
- (ii) Registration No.: **2015-05**
- (iii) County: **SACRAMENTO**

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

or

9. ☐ I am a California sheriff or marshal and I certify that the foregoing is true and correct.

Date: **09/14/2017**

**Nationwide Legal, LLC (12-234648)**  
**1609 James M. Wood Blvd., 2nd Fl**  
**Los Angeles, CA 90015**  
**(213) 249-9999**  
**www.nationwideasap.com**

**GREGORY CHOW**

(NAME OF PERSON WHO SERVED PAPERS/SHERIFF OR MARSHAL)

(SIGNATURE)

# NATIONWIDE LEGAL LLC

**COURT • PROCESS • MESSENGER**

www.nationwideasap.com

legal@nationwideasap.com

DATE 09/13/17

CONTROL # 1008436

Los Angeles	CA	(213) 249-9999	(213) 249-9990
Santa Ana	CA	(714) 558-2400	(714) 558-2401
San Francisco	CA	(415) 351-0400	(415) 351-0407
San Diego	CA	(619) 232-7500	(619) 232-7600
Riverside	CA	(951) 275-0071	(951) 275-0074
Sacramento	CA	(916) 443-4400	(916) 443-4401
Phoenix	AZ	(602) 256-9700	(602) 256-9720
Tucson	AZ	(520) 624-9700	(520) 624-9701
Las Vegas	NV	(702) 385-5444	(702) 385-1444

Firm: MICHEL & ASSOCIATES

Attorney:  
Secretary: LAURA PALMERIN  
Email:

Telephone: 562 216-4444 Acct. # 723

Ref./Billing #: 2155

**SERVICE TYPE:** STANDARD PROCESS

## MESSENGER SERVICES

From: MICHEL & ASSOCIATES  
180 EAST OCEAN BLVD.  
200  
LONG BEACH, CA 90802

To: XAVIER BECERRA, IN HIS OFFICIAL  
1300 .I. STREET  
SACRAMENTO CA 95814  
Attention: CAPACITY

Sender:

## COURT SERVICES

Case Number:  
Case Name: 17CECG03093  
VILLANUEVA VS

<input type="checkbox"/> Court Filing	<input checked="" type="checkbox"/> ADVANCE
<input type="checkbox"/> Research/Copy	Fees Attached \$ _____
<input type="checkbox"/> Courtesy Copy	Advance Fees \$ _____
<input type="checkbox"/> Recording	Check Number: _____

## DRIVER NOTES

NOTES:

<input type="checkbox"/> Office Service	<input checked="" type="checkbox"/> ADVANCE
<input type="checkbox"/> Business	Fees Attached \$ _____
<input type="checkbox"/> Residence	Advance Fees \$ _____
<input type="checkbox"/> Substituted OK	Check Number: _____

Service Deadline

DOCUMENTS / SPECIAL INSTRUCTIONS:

☐ **Do Not ADVANCE**

BECERRA  
WITH RELATED DOCS  
SERVE

SUMMONS & COMPLAINT

Received By:

Date:

Time: