

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

**PROOF OF SERVICE**

I, \_\_\_\_\_, declare as follows:

I am a resident of the State of California, over the age of eighteen years, and not a party to the within action. I am employed at the Fresno County Employees' Retirement Association, 1111 H Street, Fresno, California, 93721.

On \_\_\_\_\_, I served a copy(ies) of the within

**NOTICE TO CLAIMANT FILING OF COMPLAINT FOR DAMAGES**

on the interested party(ies) in said action addressed as follows:

\_\_\_\_\_ (Claimant)

\_\_\_\_\_

\_\_\_\_\_ (Courtesy Copy)

\_\_\_\_\_

\_\_\_\_\_

by placing the document(s) listed above for mailing in the United States mail at Fresno, California, in accordance with my employer's ordinary practice for collection and processing of mail, and addressed as set forth above.

by transmitting via facsimile the above listed document(s) to the fax number(s) set forth above on this date before 5:00 p.m. pacific standard time.

by personally delivering the document(s) listed above to the person(s) at the address(es) set forth above.

by placing the document(s) listed above in a sealed envelope, and placing the same for overnight delivery by California Overnight at Fresno, California.

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

Executed on \_\_\_\_\_, at Fresno, California.

Signature \_\_\_\_\_

by \_\_\_\_\_