ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number and Address):			
TELEPHONE NO: FAX NO. (Optional): E-MAIL ADDRESS (Optional):			
ATTORNEY FOR (Name):			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN JOAQUIN STREET ADDRESS: 315 W. ELM STREET			
MAILING ADDRESS: 315 W. ELIM STREET			
CITY AND ZIP CODE: LODI, CA 95240 BRANCH OF NAME: LODI			
Estate of In the Matter of:	CASE NUMBER:		
Decedent Guardianship Conservatorship Trust Other			
DECLARATION OF DUE DILIGENCE	HEARING DATE:		
	DEPT: 11A	TIME:	
IMPORTANT!			
You must fill out and file a <u>separate</u> form for <u>each</u> person you car	nnot locate or ser	ve.	
I,, declare as follows:			
1. I have been unable to locate or serve the following person:			
Person's relationship to the decedent, settlor, ward, or conservatee:			
2. Last Known Address			
a. I do not have any information on the person's last known address. (If marked, skip Items 2b-2h.)			
b. The person's last known address:			
To the best of my knowledge, he or she last lived at this address on (date):			
c. I spoke with the current resident(s) of this address on (date):			
Name of resident:			
Information given:			
Continued on Attachment 2c			
d. I did not speak with the current resident(s) of this address because (expla	in):		
Continued on Attachment 2d			
e. I spoke with the neighbor(s) of the person's last known address on (date)	:		
Name of neighbor:			
Information given:			
Continued on Attachment 2e			

DECLARATION OF DUE DILIGENCE

f. I did not speak with the current neighbor(s) of the person's last known address because (explain):

Continued on Attachment 2f

I spoke with the person's prior landlord, (name) g. and asked whether he or she knew where the person could be located. The answer I was given was:

Continued on Attachment 2g

h. I did not speak with the person's prior landlord regarding the person's whereabouts because:

Continued on Attachment 2h

3. Employment

IN RE:

- a. I do not have any information on the person's last known employer. (If marked, skip Item 3b.)
- b. I have spoken with the person's last known employer,

and asked whether he or she knew where the person could be located. The answer I was given was:

Continued on Attachment 3b

- 4. Relatives
 - a. I do not have any contact information for any of the person's relatives, friends, or other individuals who might have knowledge of the person's whereabouts. (If marked, skip Item 4b)
 - b. I have spoken with the person's relatives, friends or other individuals who might have knowledge of the person's whereabouts. The individual(s) I spoke with:

Name:	Relationship:
I was told:	

Name: _____ Relationship: _____

I was told:

IN F	RE:		CASE NUMBER:
		Name:	Relationship:
		I was told:	
		Name:	Relationshin:
		I was told:	
5.	Lai	Continued on Attachment 4b and Prison Searches	
3.			
		ave checked the following:	
	a.	The county jail in the following California counties:	
		Results:	
		Results.	
		Continued on Attachment 5a	
	b.	The California Department of Correction Inmate Locater https	://inmatelocator.cdcr.ca.gov
		Results:	
		Continued on Attachment 5b	
	c.	The Federal Bureau of Prisons Inmate Locator https://www.bo	p.gov/PublicInfo/execute/inmateloc
		Results:	
		Continued on Attachment 5c	
6.		earched the telephone directory for	County (where the person was
	las	known or believed to live) and this was the result:	
		Continued on Attachment 6	

DECLARATION OF DUE DILIGENCE

IN RE:	CASE NUMBER:

- 7. I made the following internet searches within the last 30-days in an effort to locate the person:
 - a. Google; results:

b. Facebook; results:

c. Instagram; results:

d. Other ; results:

A printout of the results of my search(s) is/are attached as Attachment 7

8. I have made the following other efforts to locate and serve the person:

Continued on Attachment 8

Number of pages attached:

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

Date

Declarant (Signature)

DECLARATION OF DUE DILIGENCE

IN RE:	CASE NUMBER:

PROOF OF SERVICE OF DECLARATION OF DUE DILIGENCE

- 1. I am over the age of 18 and not a party to this action. I am a resident or employed in the county where the mailing occurred.
- 2. My residence or business address is:
- 3. I served the foregoing Declaration of Due Diligence on each person named below by enclosing a copy in an envelope addressed as shown below AND

depositing the sealed envelope with the United States Postal Service on the date and at the place shown in item 4 with the postage fully prepaid.

placing the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with the business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United State Postal Service in a sealed envelope with postage fully prepaid.

4. Date Mailed:

Place mailed (city, state):

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

Date:

(TYPE OR PRINT NAME OF PERSON COMPLETING THIS FORM)

(SIGNATURE OF PERSON COMPLETING THIS FORM)

NAME AND ADDRESS OF EACH PERSON TO WHOM NOTICE WAS MAILED

Name of person served	Address (number, street, city, state and zip code)
Continued on Attachment	

PROOF OF SERVICE OF DECLARATION OF DUE DILIGENCE