ATTORNEY OR PARTY WITHOUT ATTORNEY *(Name, State Bar number, and address):*	***FOR COURT USE ONLY***
— TELEPHONE NO.: FAX NO.: ATTORNEY FOR *(Name)*:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PLAINTIFF: DEFENDANT: EMPLOYEE:	
PROOF OF PERSONAL SERVICE (Workplace Violence)	CASE NUMBER:

Instructions to Plaintiff: *After having the other party served with any of the documents identified in item 2 have the person who served the documents complete this* Proof of Personal Service*. You cannot serve these papers. Give the completed* Proof of Personal Service *to the clerk for filing.*

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

2. I served a copy of the following documents *(check the box before the title of each document you served)*:
   a. ☐ *Order to Show Cause (Workplace Violence)* (form WV-120)
      ☐ and *Temporary Restraining Order (CLETS)* (form WV-120)
   b. ☐ *Petition of Employer for Injunction Prohibiting Violence or Threats of Violence Against Employee (Workplace Violence)*
      and ☐ *Application for Temporary Restraining Order* (form WV-100)
   c. ☐ Blank *Response to Petition of Employer for Injunction Prohibiting Violence or Threats of Violence Against Employee (Workplace Violence)* (form WV-110)
   d. ☐ *Proof of Service by Mail of Completed Response (Workplace Violence)* (form WV-131)
   e. ☐ *Order After Hearing on Petition of Employer for Injunction Prohibiting Violence or Threats of Violence Against Employee (CLETS) (Workplace Violence)* (form WV-140)
   f. ☐ Blank *Proof of Sale of or Turning in of Firearms* (form WV-145)
   g. ☐ *Other (specify)*:

3. Person served *(name)*:

4. By personally delivering copies to the person served, as follows:
   a. Date: b. Time:
   c. Address:

5. My residence or business address is *(specify)*:

6. My telephone number is *(specify)*:

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

Date:

(TYPE OR PRINT NAME)

(SIGNATURE)

Form Approved for Optional Use
Judicial Council of California
WV-130 [Rev. January 1, 2005]

PROOF OF PERSONAL SERVICE (Workplace Violence)

Code of Civil Procedure, §§ 527.8 and 527.9
www.courtinfo.ca.gov

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