



## PROCESS RECEIPT AND RETURN

PLAINTIFF <i>The "So Strides" ex rel Shawn Bridgewater Private Attorney General</i>	COURT CASE NUMBER <i>SAN FRANCISCO Superior Court CASE# CGC-08-418207</i>
DEFENDANT	TYPE OF PROCESS

**SERVE  
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Number of parties to be  
served in this case

Check for service  
on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,  
All Telephone Numbers, and Estimated Times Available for Service):

Signature of Attorney other Originator requesting service on behalf of:

- ☐ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

DATE

### DO NOT WRITE BELOW THIS LINE

Total Process _____	District of Origin No. _____	District to Serve No. _____	Signature of Authorized Representative _____	Date _____
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Date

Time

☐ am  
☐ pm

Address (complete only different than shown above)

Signature of Authorized Representative

REMARKS