

Name, Address, Telephone No. &amp; I.D. No.

<b>UNITED STATES BANKRUPTCY COURT</b> SOUTHERN DISTRICT OF CALIFORNIA 325 West F Street, San Diego, California 92101-6991		
In Re		BANKRUPTCY NO.
	Debtor(s)	
		ADVERSARY NO.
	Plaintiff(s)	
v.		
	Defendant(s)	

## PROOF OF SERVICE

I, \_\_\_\_\_ am a resident of the State of California, over the age of 18 years, and not a party to this action.

On \_\_\_\_\_, I served the following documents:

### 1. To Be Served by the Court via Notice of Electronic Filing ("NEF"):

Under controlling Local Bankruptcy Rules(s) ("LBR"), the document(s) listed above will be served by the court via NEF and hyperlink to the document. On \_\_\_\_\_, I checked the CM/ECF docket for this bankruptcy case or adversary proceeding and determined that the following person(s) are on the Electronic Mail Notice List to receive NEF transmission at the e-mail address(es) indicated and/or as checked below:

☐

Chapter 7 Trustee:

☐

For Chapter 7, 11, &amp; 12 cases:

UNITED STATES TRUSTEE  
ustp.region15@usdoj.gov

☐

For Chapter 13 cases:

MICHAEL KOCH, TRUSTEE  
mkoch@ch13.sdcoxmail.com

2. **Served by United States Mail:**

On \_\_\_\_\_, I served the following person(s) and/or entity(ies) at the last known address(es) in this bankruptcy case or adversary proceeding by placing accurate copies in a sealed envelope in the United States Mail via 1) first class, postage prepaid or 2) certified mail with receipt number, addressed as follows:

3. **Served by Personal Delivery, Facsimile Transmission, Overnight Delivery, or Electronic Mail:**

Under Fed.R.Civ.P.5 and controlling LBR, on \_\_\_\_\_, I served the following person(s) and/or entity(ies) by personal delivery, or (for those who consented in writing to such service method), by facsimile transmission, by overnight delivery and/or electronic mail as follows:

I declare under penalty of perjury under the laws of the United States of America that the statements made in this proof of service are true and correct.

Executed on

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Typed Name and Signature)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, ZIP Code)