PARTY WITHOUT ATTORNEY (Name and address):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.(Optional):	
EMAIL ADDRESS:	

SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO
☐ CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101
☐ CENTRAL DIVISION, HALL OF JUSTICE, 330 W. BROADWAY, SAN DIEGO, CA 92101
☐ EAST COUNTY DIVISION, 250 E. MAIN ST., EL CAJON, CA 92020
☐ NORTH COUNTY DIVISION, 325 S. MELROSE DR., VISTA, CA 92081
☐ SOUTH COUNTY DIVISION, 500 3RD AVE., CHULA VISTA, CA 91910

PLAINTIFF/PETITIONER

DEFENDANT/RESPONDENT

NOTICE OF CONSENT/WITHDRAWAL OF CONSENT TO RECEIVE ELECTRONIC SERVICE	CASE NUMBER

This form is to be used by **self-represented litigants** in civil, family, and small claims actions to consent or withdraw consent to receive electronic service.

THE COURT AND ALL PARTIES ARE NOTIFIED THAT:

Pursuant to Code of Civil Procedure section 1010.6, I, _____ (name) the
☐ Plaintiff ☐ Defendant ☐ Petitioner ☐ Respondent ☐ Other Parent ☐ Other: _____
(Select one)

☐ **CONSENT** to receive service of all notices and documents electronically in the above-entitled case. Electronic service will be accepted at the following electronic service address:

_____(email)

☐ **WITHDRAW CONSENT** to receive service of all notices and documents electronically in the above-entitled case. Service will be accepted at the following physical address:

Street	City	State	Zip Code

Date: _____

Type or print name	Signature

This document must be served on all appearing parties. If served by mail, use form Proof of Service by First-Class Mail – Civil (JC Form #POS-030).

PROOF OF ELECTRONIC SERVICE

1. I am at least 18 years old,
    a. My residence or business address is: _____

    b. My electronic service address is: _____

2. I electronically served this Notice as follows:
    a. Name of person served: _____

    b. Electronic service address of person served: _____

       On behalf of (name or names of parties represented, if person served is an attorney)

       _____

    c. On _____ (date) at _____ ☐ a.m. ☐ p.m.

    ☐ Names and addresses of additional persons served are attached.

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

**NOTICE OF CONSENT/WITHDRAWAL OF CONSENT
TO RECEIVE ELECTRONIC SERVICE**

Code of Civ. Proc., §1010.6