Proof of Service by  
Personal Delivery

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| **Proof of Service Form** | | | |
| Directions: Please complete this form and attach to document when a Proof of Service by Personal Delivery is required. Retain a copy for your records. | | | |
| **Personal Delivery**  On, enter date, I personally delivered the attached to: | | | |
| **Employee’s Name:** |  | | |
| **Department/ Location:** |  | | |
| **Briefly explain the document(s) being hand delivered:** |  | | |
| **I declare that I am over the age of 18 years. I also declare under penalty that the foregoing is true and correct and that this declaration was executed on:** | | | |
|  | |  |  |
| **(Date)** | | *at* | **(City/State)** |
|  | |  |  |
| **Print Name** | |  | **Signature** |