

PROOF OF SERVICE BY MAIL	SMCBA Fee Arb. File: _____ - _____
Petitioner/Plaintiff:	Respondent/Defendant:

1. I am at least 18 years of age, not a party to this action, and I am a resident of or employed in the county where the mailing took place.

2. My residence or business address is: _____
Street Address

City State Zip

3. I served a Subpoena Subpoena Duces Tecum by enclosing it in an envelope AND
a. depositing the sealed envelope with the United States Postal Service with the postage fully prepaid.
b. placing the envelope for collection and mailing on the date and at the place shown in item 4 following our ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service on a sealed envelope with postage fully prepaid.

4. The envelope was addressed and mailed as follows:

a. Name of person served: _____

b. Address: _____
Street Address

City State Zip

c. Date mailed: ____ / ____ / ____
Mo. Day Year

d. Place of mailing: _____, _____
City State

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

Date: _____

Name _____ Signature _____
(Type or Print) (Of person completing form)

SMCBA Fee Arbitration Program

In the matter of a Fee dispute between)
)
)
)

Petitioner,)
)
and)
)
)
)

Respondent.)
_____)

SMCBA Fee Arb. File ____ - ____

SUBPOENA DUCES TECUM

TO: _____

You are hereby directed to appear and attend before _____
_____ arbitrator or arbitrator panel, in the above fee dispute
arbitration to be held at _____
at _____ a.m./p.m. on _____, then and there to testify and bring
with you the following:

This Subpoena is issued under the authority granted by Business and Professions Code section 6200, subdivision (g)(3) and Code of Civil Procedure section 1282.6, subdivision (b).

Dated: _____

Chief or Sole Arbitrator

Subpoena was requested from the arbitrator by:

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Date: _____