

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO: NAME: DARRYL COTTON FIRM NAME: STREET ADDRESS: 6176 Federal Boulevard CITY: San Diego STATE: CA ZIP CODE: 92114 TELEPHONE NO.: (619) 954-4447 FAX NO.: E-MAIL ADDRESS: 151DarrylCotton@gmail.com ATTORNEY FOR (name): Petitioner In Propria Persona		POS-050/EFS-050 ELECTRONICALLY FILED Superior Court of California, County of San Diego 05/11/2022 at 02:10:00 PM Clerk of the Superior Court By Chona De Los Santos, Deputy Clerk
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO STREET ADDRESS: 330 West Broadway MAILING ADDRESS: 330 West Broadway CITY AND ZIP CODE: San Diego, CA 92101 BRANCH NAME: Central Division - Civil		
PLAINTIFF/PETITIONER: DARRYL COTTON DEFENDANT/RESPONDENT: LAWRENCE (A/K/A LARRY) GERACI		
PROOF OF ELECTRONIC SERVICE		CASE NUMBER: 37-2022-0000023-CU-MC-CTL JUDICIAL OFFICER: The Honorable James A. Mangione DEPARTMENT: C-75

1. I am at least 18 years old.
 - a. My residence or business address is (specify):
 402 West Broadway, Suite 400
 San Diego, CA 92101-2994
 - b. My electronic service address is (specify):
 zoe.g.villaroman@gmail.com
2. I electronically served the following documents (exact titles):
 Amended Notice of Appeal

☐ The documents served are listed in an attachment. (Form POS-050(D)/EFS-050(D) may be used for this purpose.)

3. I electronically served the documents listed in 2 as follows:
 - a. Name of person served: James Crosby
 On behalf of (name or names of parties represented, if person served is an attorney):
 Attorney for Defendant Lawrence (a/k/a Larry) Geraci
 - b. Electronic service address of person served :
 crosby@crosbyattorney.com
 - c. On (date): May 11, 2022

☐ The documents listed in item 2 were served electronically on the persons and in the manner described in an attachment.
 (Form POS-050(P)/EFS-050(P) may be used for this purpose.)

Date: May 11, 2022

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

 ZOE VILLAROMAN
 (TYPE OR PRINT NAME OF DECLARANT)


 (SIGNATURE OF DECLARANT)