

<p>ATTORNEY OR PARTY WITHOUT ATTORNEY</p> <p>ACBCI/STATE BAR NUMBER:</p> <p>NAME:</p> <p>FIRM NAME:</p> <p>STREET ADDRESS:</p> <p>CITY: STATE: ZIP CODE:</p> <p>TELEPHONE NO.: FAX NO.:</p> <p>EMAIL ADDRESS:</p> <p>ATTORNEY FOR (name):</p> <p>AGUA CALIENTE BAND OF CAHUILLA INDIANS TRIBAL COURT</p> <p>STREET ADDRESS: 980 E. Tahquitz Canyon Way</p> <p>CITY AND ZIP CODE: Palm Springs, CA 92262</p>	<p><i>FOR COURT USE ONLY</i></p>
<p>PLAINTIFF/PETITIONER:</p> <p>DEFENDANT/RESPONDENT:</p>	
<p>NOTICE OF ENTRY OF JUDGMENT OR ORDER</p>	<p>CASE NUMBER:</p>

TO ALL PARTIES :

1. A judgment, decree, or order was entered in this action on (date):
2. A copy of the judgment, decree, or order is attached to this notice.

Date: _____

(TYPE OR PRINT NAME OF ATTORNEY PARTY WITHOUT ATTORNEY)



(SIGNATURE)

PLAINTIFF/PETITIONER: DEFENDANT/RESPONDENT:	CASE NUMBER:
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**PROOF OF SERVICE BY FIRST-CLASS MAIL
 NOTICE OF ENTRY OF JUDGMENT OR ORDER**

(NOTE: You cannot serve the Notice of Entry of Judgment or Order if you are a party in the action. The person who served the notice must complete this proof of service.)

1. I am at least 18 years old and **not a party to this action**. I am a resident of or employed in the county where the mailing took place, and my residence or business address is *(specify)*:

2. I served a copy of the *Notice of Entry of Judgment or Order* by enclosing it in a sealed envelope with postage fully prepaid and *(check one)*:

- a. deposited the sealed envelope with the United States Postal Service.
- b. placed the sealed envelope for collection and processing for mailing, following this business's usual practices, with which I am readily familiar. On the same day correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service.

3. The *Notice of Entry of Judgment or Order* was mailed:

- a. on *(date)*:
- b. from *(city and state)*:

4. The envelope was addressed and mailed as follows:

- | | |
|--|--|
| <ul style="list-style-type: none"> a. Name of person served:
 Street address: City: State and zip code: | <ul style="list-style-type: none"> c. Name of person served:
 Street address: City: State and zip code: |
| <ul style="list-style-type: none"> b. Name of person served:
 Street address: City: State and zip code: | <ul style="list-style-type: none"> d. Name of person served:
 Street address: City: State and zip code: |

Names and addresses of additional persons served are attached. *(You may use form POS-030(P).)*

5. Number of pages attached:

I declare under penalty of perjury under the laws of the Agua Caliente Band of Cahuilla Indians that the foregoing is true and correct. Date:

 (TYPE OR PRINT NAME OF DECLARANT)



 (SIGNATURE OF DECLARANT)