

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) Veronica Lucero Davillier Law Group, LLC 4105 North 20th Street Suite 110, Phoenix, AZ 85016 TELEPHONE NO.: (602) 730-2985 FAX NO. E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	FOR COURT USE ONLY
IN THE ARIZONA SUPERIOR COURT IN MOHAVE COUNTY STREET ADDRESS: 401 E. SPRING ST. MAILING ADDRESS: CITY AND ZIP CODE: KINGMAN, AZ 86402 BRANCH NAME: KINGMAN	
PLAINTIFF: Arizona Republican Party, et al DEFENDANT: Katie Hobbs; et al.	CASE NUMBER: S8015CV202200594
PROOF OF SERVICE	Ref. No. or File No.

AT THE TIME OF SERVICE I WAS AT LEAST 18 YEARS OF AGE AND NOT A PARTY TO THIS ACTION
 I SERVED COPIES OF THE FOLLOWING DOCUMENTS:

**Summons & Complaint; Civil Cover Sheet; Application for Order to Show Cause;; Order to Show Cause;
 Proposed Order**

PARTY SERVED: **Virginia Ross**

PERSON SERVED: **Dana Lewis- Assistant County Recorder - Authorized to Accept Service of Process**

DATE & TIME OF DELIVERY: **5/19/2022
 1:33 PM**

ADDRESS, CITY, AND STATE: **31 N Pinal Street
 Florence, AZ 85132**

PHYSICAL DESCRIPTION: **Age: 45 Weight: 170 Hair: Blonde**
Sex: Female Height: 5'4 Eyes: Blue
Skin: White Marks:

MANNER OF SERVICE:

Personal Service - By personally delivering copies.

FITNESS FEES:

Were offered or demanded and paid: \$.00.

Fee for Service: \$ 275.00

County: **Maricopa**

Registration No.: **MC-7751**

PROCESS SERVER ONE

555 ANTON BLVD STE 150

COSTA MESA, CA 92626

(855) 545-1303



I declare under penalty of perjury under the laws of the
 United States that the foregoing information contained
 in the return of service and statement of service fees is
 true and correct and that this declaration was executed
 on **May 23, 2022**

Signature: _____

Jerry L. Horacek

PROOF OF SERVICE

DefaultProof18451