

No. _____

IN THE
SUPREME COURT OF THE UNITED STATES

“ *IN RE* [FRANK DEVILLE]”- PETITIONER

VS.

JAMES R. BLOCH ET. AL. - RESPONDENT(S)

CERTIFICATE OF SERVICE

Frank Deville
Po Box 535
Rancho Cucamonga Ca 91729
909-921-7053

Petitioner, pro se

CERTIFICATE OF SERVICE

I, hereby certify that on the 17th of February a copy of the foregoing petition for Writ of Mandamus, Proof of Service, Motion for leave to proceed in Forma Pauperis was filed with the clerk of the court of the United States Supreme Court this would be accomplished by using United States Post Office Mail by certified mail. Notarized document Attached:

Respectfully Submitted,



Dee Deville
Po Box 535
Rancho Cucamonga , Ca. 91729
(909) 921-7053

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

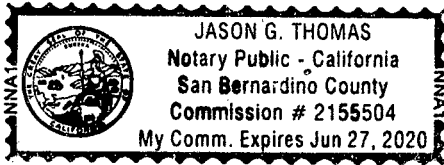
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of San Bernardino)
On Feb. 17, 2020 before me, Jason G. Thomas, Notary Public
Date Here Insert Name and Title of the Officer
personally appeared Dee Deville
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature [Handwritten Signature]
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Certificate of Service Document Date: 2-17-2020
Number of Pages: 2 Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____