

Affidavit of Service

State of _____

County of _____

I, _____, being duly sworn, declare and say as follows:

1. I am over eighteen (18) years of age and am not a party to this action.
2. On the _____ day of _____, 20____, at _____ (time), I served the following documents:

3. The documents were delivered to:

Name: _____

Address: _____

4. Method of Service: _____

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

Executed on this _____ day of _____, 20____.

Signature of Affiant

Printed Name

Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public