

Circuit Court for _____ Case No. _____

City or County

Name

Name

Street Address

Apt. #

vs.

Street Address

Apt. #

()

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City

State

Zip Code

Area Code

Telephone

City

State

Zip Code

Area Code

Telephone

Plaintiff

Defendant

AFFIDAVIT OF SERVICE

(Certified Mail)

(Dom.Rel. 56)

I certify that I served a copy of the _____
Name of ALL pleadings/documents served

(which were previously filed with this Court) upon _____
Name of person served

on _____, 19____, at _____
Date Street Address City State Zip Code

by certified mail, restricted delivery, return receipt requested. The **original** return receipt signed

by _____ is attached. Also attached is a copy of any summons ("process") issued by the Court, the original of which I included in the certified mail service upon the person served. I certify that I am over eighteen (18) years of age and I am not the Plaintiff or the Defendant.

I SOLEMNLY AFFIRM under the penalties of perjury that the contents of the foregoing paper are true to the best of my knowledge, information, and belief.

Date

Name of person certifying service (signature)

Name of person certifying service (printed or typed)

Street Address City State Zip Code
of person certifying service

()

Area Code

Telephone Number of person certifying service