

Affidavit of Process Server

(NAME OF COURT)

PLAINTIFF/PETITIONER VS DEFENDANT/RESPONDENT CASE NUMBER

I _____, being first duly sworn, depose and say: that I am over the age of 18 years and not a party to this action, and that within the boundaries of the state where service was effected, I was authorized by law to perform said service.

Service: I served _____
NAME OF PERSON / ENTITY BEING SERVED

with (list documents) _____

by leaving with _____ At _____
NAME RELATIONSHIP

Residence _____
ADDRESS CITY / STATE

Business _____
ADDRESS CITY / STATE

On _____ AT _____ TIME _____
DATE TIME

Thereafter copies of the documents were mailed by prepaid, first class mail on _____ DATE
from _____ CITY STATE ZIP

Manner of Service:

- Personal:** By personally delivering copies to the person being served.
- Substituted at Residence:** By leaving copies at the dwelling house or usual place of abode of the person being served with a member of the household over the age of _____ and explaining the general nature of the papers.
- Substituted at Business:** By leaving, during office hours, copies at the office of the person/entity being served with the person apparently in charge thereof.
- Posting:** By posting copies in a conspicuous manner to the front door of the person/entity being served.

Non-Service: After due search, careful inquiry and diligent attempts at the address(es) listed above, I have been unable to effect process upon the person/entity being served because of the following reason(s):

- Unknown at Address
- Moved, Left no Forwarding
- Service Cancelled by Litigant
- Unable to Serve in Timely Fashion
- Address Does Not Exist
- Other _____

Service Attempts: Service was attempted on: (1) _____ (2) _____
DATE TIME DATE TIME

(3) _____ (4) _____ (5) _____
DATE TIME DATE TIME

Description: Age _____ Sex _____ Race _____ Height _____ Weight _____ Hair _____ Beard _____ Glasses _____

SIGNATURE OF PROCESS SERVER

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20_____, by _____,
Proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

SIGNATURE OF NOTARY PUBLIC

NOTARY PUBLIC for the state of _____