

# AFFIDAVIT OF SERVICE

County of \_\_\_\_\_

State of \_\_\_\_\_

I, \_\_\_\_\_ [Server's Full Name], declare under penalty of perjury that the following documents were delivered and served in the following manner:

The documents served are described as follows:

\_\_\_\_\_.

## 1. RECIPIENT

- The documents mentioned above were served to:
  - \_\_\_\_\_ (Recipient Full Name)
  - With an address/location of: \_\_\_\_\_
  - Date: \_\_\_\_\_ [Day], \_\_\_\_\_ [Year], Time: \_\_\_\_\_ : \_\_\_\_\_ [AM/PM]

## 2. LOCATION OF SERVICE

- The documents were delivered at the following location:  
\_\_\_\_\_ [Full Address or Location of Service] by  
[check all that apply below]
- The documents were served by \_\_\_\_\_ [Method of Service, e.g., hand-delivered, mailed, rejected delivery, someone at the workplace, someone at the residence, leaving at the residence, etc.]

Signature of Server: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_