

State of Minnesota

District Court

County _____

Judicial District: _____
Court File Number: _____
Case Type: _____

Petitioner / Plaintiff

and / vs

Affidavit of Personal Service

Respondent / Defendant

STATE OF MINNESOTA)
) SS
COUNTY OF _____)
(County where Affidavit signed)

I, _____, state that I am at least 18 years of
(Name of person who hand-delivered documents)
age having been born on _____, and that on _____

I served the _____
(list all papers handed to the other party)

upon _____ by handing a true and correct copy
(Name of other party)
of the documents to him/her at _____
(street address, city, state)

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: _____

Signature
Name: _____
Address: _____
City/State/Zip: _____
Telephone: (_____) _____
E-mail address: _____