

DISTRICT COURT

MOTION TO MODIFY CHILD SUPPORT AND/OR SPOUSAL MAINTENANCE

IMPORTANT NOTICES

YOU CAN USE THIS PACKET OF FORMS ONLY IF:

- (1) There is already an existing court order setting or reserving child support and/or spousal maintenance;
- (2) You are asking the court to change child support, medical support, child care, and/or spousal maintenance and you are **not** asking the court to change parenting time (visitation) or custody; **and**
- (3) You are filing this motion to be heard in district court.

You cannot use this form to ask the court to change parenting time (visitation) or custody

- Court personnel and the county attorney's office **cannot** help you fill out these forms.

- You should see a lawyer if you do not know how to answer the questions on these forms.

- You **must** fill out all three forms included with this packet and you **must** follow the instructions included with this packet.

- Type your answers or print neatly using dark ink.

GENERAL INFORMATION

When filling out the forms be as accurate and as detailed as possible. This will help the court to clearly understand your circumstances. The hearing will be held before a district court judge.

A court order for child support and/or spousal maintenance may be changed only by showing that the current order is unreasonable and unfair because one of the following conditions has happened:

- Substantial increase / decrease in earnings;
- Substantial increase / decrease in need of a party or the child(ren) involved in this court order;
- Receipt of public assistance;
- Receipt of disability payments for you or the child(ren) involved in this court order;
- A change in the cost of living for either party as measured by the Federal Bureau of Labor Statistics;
- A change in the availability or cost of medical and/or dental insurance coverage or expenses of the child(ren), yourself, and/or former spouse involved in this court order;
- The addition, elimination, or substantial increase / decrease of work-related or education-related child care expenses for the child(ren) involved in this court order;
- Child(ren) attaining the age of 18, graduating from high school, joining the military, or living independently;
- A change in the residence of the child(ren).

The following types of documentation are generally helpful and should be filed along with your Affidavit as proof of your current income:

- W-2 forms, generally the most recent year
- Tax returns, generally the most recent year
- Payroll check stubs, generally the most recent three months
- Statements and receipts of income, if self employed, generally for the last year

If you are now ordered to pay child support and are requesting child support to be suspended because the child(ren) is/are living with you, you must provide proof. Examples of things that you can file with the court as proof are:

- a signed and notarized statement from the other party stating the child(ren) has changed residence
- School records
- Day care records or medical records

Note: To protect your privacy, the other party, and your child(ren), all social security numbers listed on papers you file with the court must be blackened out (crossed out) completely. Failure to do this means your social security number could be available to the general public and you could be charged court costs for the failure to keep the other party's social security number private.

INSTRUCTIONS

STEP 1

FILL OUT THE “NOTICE OF MOTION AND MOTION TO MODIFY CHILD SUPPORT/SPOUSAL MAINTENANCE” FORM

Fill out the “Notice of Motion and Motion to Modify Child Support/Spousal Maintenance” form included in this packet by following Steps 1a through 1f below. This form tells the court and the other party that you are asking the court to modify your support/maintenance amount. It also tells the other party of the date, time, and location of the hearing.

STEP 1a: Fill in the information at the top of the form. The information to fill in the boxes and blanks at the top of the form can be found at the top of your current child support order/maintenance order or your divorce or paternity decree, including:

- The county where your case is located (which may be different from the county where you live).
- The number of the judicial district where your case is located and where your current order was issued.
- The court file number.
- The name of the Petitioner/Plaintiff.
- The name of the Respondent/Defendant.

Copy the names of the parties in the exact same order as they appear on your current child support and/or maintenance order or your divorce or paternity decree. If you are the Petitioner/Plaintiff in the current order or decree you will be the Petitioner/Plaintiff in this motion. If you are the Respondent/Defendant in the current order or decree you will be the Respondent/Defendant in this motion.

STEP 1b: Fill in the name and last known address of the other party where your case is located.

STEP 1c: **DO NOT** fill in the date, time, and location of the hearing yet. You will fill in this information as part of Step 3 below.

STEP 1d: Review the choices for the type of changes you are asking the court to make. Check off only the boxes that list the changes you are asking the court to make -- you do not need to check off every box.
You may check off as many changes as you wish, but it will be up to the court to decide what changes will actually be ordered.

STEP 1e: Fill in the name and phone number of the person to contact to settle this matter.

STEP 1f: **ONLY DATE AND SIGN THE “NOTICE OF MOTION AND MOTION” FORM WHEN YOU ARE IN FRONT OF A NOTARY PUBLIC OR THE COURT CLERK. MAKE SURE TO BRING PICTURE IDENTIFICATION TO SHOW TO THE NOTARY PUBLIC OR CLERK.** A Notary Public can

usually be found at a bank and sometimes at the courthouse.

STEP 2
**FILL OUT THE “AFFIDAVIT IN SUPPORT OF MOTION
TO MODIFY CHILD SUPPORT/SPOUSAL MAINTENANCE” FORM**

Fill out the “Affidavit in Support of Motion to Modify Child Support/Spousal Maintenance” form by following Steps 2a through 2d below. This form tells the court and the other party what you are asking for from the court and WHY you are asking for it.

STEP 2a: Fill in the top of the form the same way you did on your “Notice of Motion and Motion” form in Step 1a above.

STEP 2b: Fill in the answers to questions 1 through 21 on the “Affidavit in Support of Motion”. If a question does not apply to you, then answer “does not apply.”

STEP 2c: Attach the following documents if they help to support your motion, to the “Affidavit in Support of Motion” form:

• Proof of your income (for example, copies of your most recent paycheck stubs or W-2 forms, or statements and receipts of income if you are self employed)

• Proof of your expenses, if they are the reason you are asking for the child support and/or maintenance order to be changed

• Proof of unemployment/disability (lay-off notice, doctor’s statement, etc.)

• Verification for status of unemployment compensation claim or worker’s compensation claim

• Verification of receipt and amount of social security income

• Verification of child care expenses

• Verification of the cost of medical and/or dental insurance coverage

• Copies of your tax returns for the most recent year. Place all copies of tax returns in an envelope in order to keep this information private. You **must** print on the outside of the envelope “CONFIDENTIAL TAX RETURN OF _____ FOR YEAR(S) _____.”

Remember to blacken out (cross out) completely all social security numbers on your tax returns, paycheck stubs, W-2 forms, and any other document that contains a social security number.

STEP 2d: **ONLY DATE AND SIGN YOUR “AFFIDAVIT IN SUPPORT OF MOTION” WHEN YOU ARE IN FRONT OF A NOTARY PUBLIC OR THE COURT CLERK. MAKE SURE TO BRING PICTURE IDENTIFICATION TO SHOW TO THE NOTARY PUBLIC OR CLERK.** A Notary Public can usually be found at a bank and sometimes at the courthouse.

STEP 3
OBTAIN A HEARING DATE, TIME, AND LOCATION
FROM THE COUNTY COURT ADMINISTRATOR

Go back to the “Notice of Motion and Motion” form and fill in the date, time, and location of the hearing by following Steps 3a and 3b below.

STEP 3a: **Contact the Court Administrator’s Office in the county where your case is located. Tell the Court Administrator that you will be filing a motion for modification of child support and/or spousal maintenance in District Court and need a date, time, room number, address for a hearing, and the name of the judge or referee who will hear the matter. The hearing date must be at least 17 days away from the date the documents are mailed to the other party. Count the day after you mail it as Day 1.**

STEP 3b: Using the information you received from the Court Administrator, fill in the following on the “Notice of Motion and Motion” form:

- The date (month, day, and year) of the hearing.
- The time of the hearing, including a.m. or p.m.
- The name of the county building where the hearing will take place.
- The address of the building and the name of the city where the hearing will take place.
- The name of the judge or referee scheduled to hear the matter.

STEP 4

MAKE COPIES OF FORMS

Step 4a: After filling in the date, time, and location of the hearing on your “Notice of Motion and Motion” form, make two copies of the “Notice of Motion and Motion” form and two copies of your “Affidavit in Support of Motion” form and two copies of all attachments (for example, paycheck stubs, tax returns, proof of expenses).

Step 4b: Keep one copy of each form and all attachments for yourself (make sure to bring your copies with you to court on the day of your hearing).

STEP 5

SERVE NOTICE ON THE OTHER PARTY
AT LEAST 17 DAYS BEFORE THE HEARING DATE

You may serve the other party by mail. If you choose to serve the other party by personal service, this must be done by someone other than yourself who is over 18 years old. This is called “service of process.” Service by mail may be completed by following Steps 5a and 5b below.

STEP 5a: Place one copy of the completed “Notice of Motion and Motion to Modify” form AND one copy of the completed “Affidavit in Support of Motion” form AND one copy of all attachments in an envelope. On the front of the envelope, write your

return address and the last known address of the other party. If the other party is represented by an attorney, you must serve the attorney instead of the party. You may need to look in the court file to see if there is a Certificate of Representation that will tell you whether the other party is represented by an attorney. Place the correct amount of postage on the envelope (you may want to take the envelope to the post office to be weighed to make sure you put on the right amount of postage).

STEP 5b: The envelopes containing the forms must be mailed to the other party (or his/her attorney if there is one) at least 17 days before the hearing date.

IF YOUR FORMS ARE NOT MAILED TO THE OTHER PARTY (OR HIS/HER ATTORNEY) AT LEAST 17 DAYS BEFORE THE HEARING DATE, YOUR MOTION MAY NOT BE HEARD BY THE COURT.

STEP 6

**THE PERSON WHO MAILED THE ENVELOPES
FILLS OUT THE "AFFIDAVIT OF SERVICE" FORM**

After the envelopes containing the forms have been mailed to the other party, the person who mailed the envelopes must fill out an "Affidavit of Service by Mail" form for each party served by following Steps 6a through 6c. This form proves to the court that the papers were mailed to the other party.

STEP 6a: Fill in the top of the form the same way you did on your "Notice of Motion and Motion" form in Step 1a above. Check the "served by mail" box if your motion papers were mailed to the other party.

STEP 6b: The person who mailed the envelopes must fill in the other blank lines:
The name of the person who mailed the envelope.
The date on which the person put the envelopes in the mail.
The name and address of the other party as listed on the envelope.
The city and state where the envelopes were put in the mail.

STEP 6c: **THE PERSON WHO MAILES THE ENVELOPES MUST SIGN THE "AFFIDAVIT OF SERVICE" IN FRONT OF A NOTARY PUBLIC OR THE COURT ADMINISTRATOR. MAKE SURE THE PERSON BRINGS PICTURE IDENTIFICATION TO SHOW TO THE NOTARY PUBLIC OR CLERK.**

STEP 7

**FILE THE FORMS WITH THE COURT ADMINISTRATOR
AND PAY ANY REQUIRED COURT FEE**

The following original documents must be filed with the court in the county where your case is located as soon as practical or at least 5 days before the scheduled hearing.

- The original of the “Notice of Motion and Motion to Modify Child Support and/or Spousal Maintenance”.
- The original of the “Affidavit in Support of Motion to Modify Child Support and/or Spousal Maintenance”.
- The original of the “Affidavit of Service by Mail”.

You must be prepared to pay any court fee, if applicable, at the time of filing (see below).

You must attach copies of all documents (such as paycheck stubs, tax returns, verification of medical/dental insurance costs or expenses, child care expenses, disability payments) to your Affidavit in Support of Motion to Modify Child Support and/or Spousal Maintenance. Be certain to blacken out all social security numbers that appear on any document you are attaching.

Court Fees

If you did not pay an initial filing fee when this case first began, you will now need to pay the filing fee. Filing fees range from \$129 to \$135, depending upon the county where your case is located.

Even if you have paid the initial filing fee, you will now be required to pay a \$20 modification fee to file this motion for modification.

If you cannot afford to pay the fee, you may ask the court for an order waiving these fees. To do this, ask the Court Administrator for an In Forma Pauperis application. You need to fill out this application and sign it in front of a Notary Public or the Court Administrator. After signing the application, file it with the court administrator. Your application will be reviewed by a judge who will decide whether you must pay the fee. If the judge does not sign the form which waives the fee, you must be prepared to pay the fee or the clerk cannot accept your forms for filing.

STEP 8

APPEAR AT THE HEARING

Come to court on the date and time scheduled for the hearing. Be sure to bring with you your copy of the “Motion to Modify Child Support and/or Spousal Maintenance” and “Affidavit in Support of Motion to Modify Child Support and/or Spousal Maintenance” and all of your supporting papers. You must bring enough copies of any supporting papers not already filed with the court nor served on the other party so that a copy can be given to the other party and the court if you want the court to consider your supporting papers.

State of Minnesota

District Court

County

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

In Re the Marriage of:
 Support of:

Plaintiff / Petitioner

vs / and

Defendant / Respondent

Intervenor

**Notice of Motion and Motion
To Modify Child Support
And/Or Spousal Maintenance**

Notice

TO:

First	Middle	Last
Street Address		Apt. No.
City	State	Zip

PLEASE TAKE NOTICE that the undersigned will bring a motion before the Honorable _____, on _____

(Name of Judge or Referee) (Date: Month, Day, Year)
at _____ o'clock at the _____ County Courthouse
(a.m./p.m.) (Time) (Name of building where hearing to be held)

or Government Center located at _____ in the city of _____
(Street address where hearing to be held)

Minnesota, (check with the court clerk at the hearing location for
(City where hearing to be held)
the room number), and will ask the court to modify the existing child support and/or spousal maintenance order as requested in the following motion.

Motion

1. I request that the court modify the support and/or maintenance order dated

(Date of existing order)

by ordering the following:

2. The facts upon which I base my request are set forth in the attached Affidavit in Support of Motion to Modify Child Support and/or Spousal Maintenance.

Notice of Rights to Other Party

- You have the right to object or respond to the changes I am requesting.
- You have 14 days from the date this motion is personally served or mailed to you to serve upon all parties a written response or counter motion objecting to the relief requested. A counter motion is where you can raise **new** support or maintenance issues, in addition to responding to the issues in this motion.
- If you decide to respond or object to this motion, a packet entitled “Response to Motion to Modify Child Support and/or Spousal Maintenance” is available from the court administrator.
- You must file a copy of your written response **at least 5 days before any scheduled hearing**. The court may, in its discretion, not consider any documents you file with the court if they are not filed on time.

Settlement

This matter may be settled without a court hearing if the parties reach an agreement. To discuss a possible settlement, contact the following person at the phone number listed:

_____ at _____
(Name of person to contact to discuss settlement) (Phone number of person to contact)

Acknowledgments by Party Making Motion:

- a. I am not serving or filing this document for any improper purpose, such as to harass or to cause unnecessary delay or needless increase in the cost of litigation.

- b. The claims, defenses, and other legal contentions therein are warranted by existing law or by a nonfrivolous argument for the extension, modification, or reversal of existing law or the establishment of new law.
- c. The allegations and other factual contentions have evidentiary support or, if specifically so identified, are likely to have evidentiary support after a reasonable opportunity for further investigation or discovery.
- d. The denials of factual contentions are warranted on the evidence or, if specifically so identified, are reasonably based on a lack of information or belief.
- e. The court may impose an appropriate sanction upon the attorneys, law firms, or parties that violate the above stated representations to the court, or are responsible for the violation.
- f. I understand that the existing order remains in full force and effect and I must continue to comply with that order until a new order is issued.

Dated:

Signature

Print Name:

Address:

City/State/Zip:

Telephone: ()

Attorney for:

State of Minnesota

District Court

County _____

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

In Re the Marriage of:
 Support of:

Plaintiff / Petitioner

vs / and

Defendant / Respondent

Intervenor

**Affidavit in Support of Motion
to Modify Child Support
and/or Spousal Maintenance**

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

My name is _____ I am the

(*check one*) (Petitioner/Plaintiff) (Respondent/Defendant) in this case, and I state under oath the following information:

Personal Information:

- 1. My current personal information is as follows:
Name:
Address:
Home phone: ()
Date of birth:

Reasons Why the Existing Order Should Be Changed:

- 2. I request a change in the existing order because of (*check all that apply*):
 - Substantially increased or decreased earnings of the party (*check one*)
 - receiving support/maintenance paying support/maintenance
 - Substantially increased or decreased needs of the (*check at least one*)
 - child(ren) party receiving support/maintenance
 - party paying support/maintenance
 - Receipt of public assistance by the (*check one*)

party receiving support/maintenance party paying support/maintenance

A change in the cost-of-living for *(check one)*

party receiving support/maintenance party paying support/maintenance
 Extraordinary medical and/or dental expenses of the child(ren).

A change in the availability of health or dental insurance coverage.

A substantial increase or decrease in existing work-related or education-related child care expenses of the *(check one)*

party receiving support/maintenance party paying support/maintenance

Receipt of social security benefits by the *(check all that apply)*

party receiving support/maintenance party paying support/maintenance
 child(ren)

A change in the residence of the child(ren)

Emancipation of a child (name of child):

_____.

3. I make the following other comments in support of my request for a change to the existing support/maintenance order:

Information From Existing Child Support Order: *(Answer only those questions that apply)*
(Skip this question if motion is for spousal maintenance only)

4. I am the parent of the following children involved in this case *(list only children involved in this case, and for each child check if you are the obligee or obligor)*:

Child's Name	Date of birth	Obligee/Obligor
_____	_____	<input type="checkbox"/> Obligee <input type="checkbox"/> Obligor
_____	_____	<input type="checkbox"/> Obligee <input type="checkbox"/> Obligor
_____	_____	<input type="checkbox"/> Obligee <input type="checkbox"/> Obligor
_____	_____	<input type="checkbox"/> Obligee <input type="checkbox"/> Obligor
_____	_____	<input type="checkbox"/> Obligee <input type="checkbox"/> Obligor

5. The existing support/maintenance order was issued by the court in _____ County and is dated _____. In that Order, I am the *(check one)* Obligor *(making payments)* Obligee *(receiving payments)*

6. In the existing order, the Obligor/former spouse is required to make the following payments for spousal maintenance support of the children *(check all that apply)*:

Child support payments of \$ _____ per week month beginning _____ *(date)*.

Medical and/or dental insurance payments of \$ _____ per week month beginning _____ *(date)*.

Uninsured medical and dental expenses of \$ _____ (dollar amount or percentage) per week month beginning _____ *(date)*.

Education-related and/or work-related child care payments of \$ _____ per

- week month beginning _____ (date).
 Spousal maintenance payments of \$ _____ per week month beginning _____ (date).

7. In the existing order, the Obligee is required to make the following payments for the support of the children (*check all that apply*):

- Child support payments of \$ _____ per week month beginning _____ (date).
 Medical and/or dental insurance payments of \$ _____ per week month beginning _____ (date).
 Uninsured medical and dental expenses of \$ _____ (dollar amount or percentage) per week month beginning _____ (date).
 Education-related and/or work-related child care payments of \$ _____ per week month beginning _____ (date).

8. At the time the existing order was issued, I was (*check one*):

- Married Separated Divorced Living with a companion Alone
If married:

a. Spouse's name: _____

Spouse's net monthly income: \$ _____

9. At the time the existing order was issued, the other party was (*check one*):

- Married Separated Divorced Living with a companion Alone
If married:

a. Spouse's name: _____

b. Spouse's net monthly income: \$ _____

10. At the time the existing order was issued, I was (*check one*):

- Unemployed.
 Employed at _____ (company or occupation) and earned \$ _____ per hour week month with a monthly net income of \$ _____ and had other monthly income totaling \$ _____ from _____ (list all sources, such as employment, public assistance, social security, or other source).

11. At the time the existing order was issued, to the best of my knowledge, the other party was (*check one*):

- Unemployed.
 Employed at _____ (company or occupation) and earned \$ _____ per hour week month with a monthly net income of \$ _____ and had other monthly income totaling \$ _____ from _____ (list all sources, such as employment, public assistance, social security, or other source).

12. At the time the existing order was issued, the child(ren) received monthly benefits in the amount of \$ _____ from _____ (list all sources such as social security benefits)

Current Information:

13. I am currently (*check one*) employed unemployed (*if employed, answer the following*):

- a. Employer:
- b. Address:
- c. Work telephone number:
- d. Occupation:
- e. Length of employment:
- f. Supervisor:
- g. Gross Pay: \$ _____ Net Pay: \$ _____
- h. Paid: Weekly Every other week Twice a month Monthly
- i. Number of withholding exemptions: _____

Previously employed by _____
for _____ years prior to the above employment.

Cost of monthly medical insurance for self: \$

Cost of monthly medical insurance for dependents: \$

Cost of monthly dental insurance for self: \$

Cost of monthly dental insurance for dependents: \$

If insurance coverage is in place, list the names of who the insurance covers:

14. To the best of my knowledge, the other party is currently:
(*check one*) employed unemployed (*if employed, answer the following*):

- a. Employer:
- b. Address:
- c. Work telephone number:
- d. Occupation:
- e. Length of employment:
- f. Supervisor:
- g. Gross Pay: \$ _____ Net Pay: \$ _____
- h. Paid: Weekly Every other week Twice a month Monthly Unknown
- i. Number of withholding exemptions: _____

Previously employed by _____
for _____ years prior to the above employment.

Cost of monthly medical insurance for self: \$

Cost of monthly medical insurance for dependents: \$

Cost of monthly dental insurance for self: \$

Cost of monthly dental insurance for dependents: \$

If insurance coverage is in place, list the names of who the insurance covers:

15. I have the following additional sources of income: (for example, public assistance, social security, Supplemental Security Income, pensions, Retirement and Survivors Disability Income, renters income, child support for other children):

Source: _____ \$ _____ month
Source: _____ \$ _____ month
Source: _____ \$ _____ month

16. The value of the property I currently own by myself or with someone else is:
- Home \$ _____
 - Household goods \$ _____
 - Purchase price of my home \$ _____
 - Balanced owed on my home \$ _____
 - Other real estate \$ _____
 - Checking/savings \$ _____
 - Automobiles \$ _____ (year and make)
 - Recreational vehicles \$ _____ (year and make)
 - Personal property \$ _____
 - Stocks/bonds/etc. \$ _____

17. I am currently (*check all that apply*):
- Married Separated Divorced Living with a companion Alone
- If married:
- a. Present spouse's name: _____

b. Present spouse's net monthly income: \$ _____

(Note: Question 17(b) only needs to be answered by an obligor who has a duty to support subsequent children) (See Minn. Stat. § 518.551, subd. 5f(1)(i))

18. The following child(ren) live in my home, but are not part of the current support order or this motion:

Child's Name	Date of Birth	Relationship
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19. My monthly expenses at the time of the existing order, compared to now, are as follows (if remarried, include total of household expenses):

	Monthly Payment at	
	Existing Order	Present Time
a.		<input type="checkbox"/>
		House
		payment or <input type="checkbox"/>
		Rent
		\$
		\$
b.		
		Real
		Estate
		Taxes,
		if not
		include

				d in (a)
				\$
				\$
c.	Association Dues or Lot Rent (for property)	\$	\$	
d.	Insurance:			
	Homeowners, if not included in (a)	\$		\$
	Car	\$	\$	-
	Life	\$	\$	
e.	Utilities: (Average Monthly Amount)			
	Gas	\$	\$	
	Electricity	\$	\$	
	Telephone	\$	\$	
	Water and garbage	\$	\$	
	Cable TV	\$	\$	
f.	Food	\$	\$	
g.	Clothing	\$	\$	
h.	Laundry/dry cleaning	\$	\$	
i.	Personal allowances and incidentals	\$	\$	
j.	Magazine and newspapers	\$	\$	
k.	Uninsured dental expenses	\$	\$	
l.	Uninsured medical expenses	\$	\$	
m.	Transportation expenses:			
	Car payment	\$	\$	
	License	\$	\$	
	Gasoline	\$	\$	
	Repairs	\$	\$	
n.	Recreation/Entertainment	\$	\$	
o.	Child(ren)'s needs (sports/school/hobbies)	\$	\$	
p.	Allowances	\$	\$	
q.	Other (list) _____	\$	\$	
r.	Charge accounts and loans (list):			
	Name of Account		Balance Owed	
	1.	\$	_____	
	2.	\$	_____	
	3.	\$	_____	
	4.	\$	_____	
	5.	\$	_____	
			TOTAL MONTHLY EXPENSES:	\$
		-	\$	-

20. The following people help me pay my current monthly expenses listed in question 19:

Spouse Roommate(s) Relatives No One

The information contained in this Affidavit is true and correct to the best of my knowledge.

Dated:

Signature *(Sign only in presence of Notary or Court Deputy)*

Print Name:

Sworn / affirmed before me this
_____ day of _____,

Address:
City/State/Zip:

Telephone: (____)

Notary Public/ Deputy Court Administrator

State of Minnesota

District Court

County _____

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

In Re the Marriage of:
 Support of:

Plaintiff / Petitioner _____

vs / and

Defendant / Respondent

Intervenor

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

- Affidavit of Personal Service**
- Affidavit of Service By Mail**

I, _____, being duly sworn, upon oath, state that on
(Name of person who hand-delivered documents)

_____, I served the attached documents, namely
(Date service made) (Title of documents hand delivered or mailed)

_____ upon (check one):

- Plaintiff / Petitioner (Name)
- Defendant / Respondent (Name)
- Other (Name)

by (check method of service used):

Personally handing a true and correct copy of the document(s) to the person(s) named above at ____ o'clock
____.m. at _____

(Address where documents delivered)

Mailing a true and correct copy of the document(s) to the person(s) named above by placing the document(s)
in an envelope with sufficient postage in the United States mail at the Post Office located in the City of
_____, State of _____, at the person's last
known address of:

Dated:

Signature (Sign only in presence of Notary or Court Deputy)

Sworn / affirmed before me this _____ day of _____,

Print Name:

Address:
City/State/Zip:

Notary Public/ Deputy Court Administrator

Telephone: (____)