

**State of Minnesota**

**District Court**

County

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Case Type: Dissolution

**In Re the Marriage of:**

Name of Petitioner

and

**Affidavit of Personal Service**

Name of Respondent

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

I, \_\_\_\_\_, being sworn, state that I am at least  
(Name of person who hand-delivered documents)

18 years of age having been born on \_\_\_\_\_, and that on \_\_\_\_\_,  
, I served the \_\_\_\_\_  
(list all papers handed to the other party)  
upon \_\_\_\_\_  
(list all papers handed to the other party) (Name of other party)  
by handing a true and correct copy of the documents to him/her.

Dated:

Signature of Person Who Served Documents  
(Sign only in front of notary public or court administrator.)

Name:

Sworn/affirmed before me this \_\_\_\_\_  
day of \_\_\_\_\_, \_\_\_\_\_.

Address:

City/State/Zip:

Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

Notary Public \ Deputy Court Administrator