

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)
COUNTY OF)SS
(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 at
(street address, city, state)

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