Circuit Court for _____ **Case No.** _____
City or County

Name						Name			
Street Address			Apt. #		VS.	Street Address			Apt. #
City	State	Zip Code	( ) Area Code	Telephone		City	State	Zip Code	( ) Area Code	Telephone
Plaintiff						*Defendant*				

AFFIDAVIT OF SERVICE
(Private Process)
(DOM REL 55)

I certify that I served _____ at _____ ☐ a.m. ☐ p.m.
Name of person served — Time — Check One

on _____ , _____ , at _____ ,
Date — Street Address — City — State — Zip Code

a copy of the _____
Name of ALL pleadings/documents served

which were previously filed with this Court. Attached is a copy of any summons ("process") issued by the Court, the original of which I served upon the person served. I certify that I am over eighteen (18) years of age and I am not the Plaintiff or the Defendant.

I SOLEMNLY AFFIRM under the penalties of perjury that the contents of the foregoing paper are true to the best of my knowledge, information, and belief.

_____
Date

_____
Name of Server (signature)

_____
Name of Server (printed or typed)

_____
Street Address of Server — **City** — **State** — **Zip Code**

( )
Area Code — **Telephone Number of Server**