

STATE OF NORTH DAKOTA
COUNTY OF _____

IN JUVENILE COURT
_____ JUDICIAL DISTRICT

IN THE INTEREST OF _____, DOB _____, A CHILD.

(Petitioner))
PETITIONER,)
Vs)

(Respondents))
RESPONDENTS.)

Case No. _____

**AFFIDAVIT OF SERVICE
BY MAIL**

Name of Person who Mailed Papers:	Time Mailed(hr:mn): <input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	Date Mailed:
Person to whom Papers were Mailed:	Street Address where Mailed:	
City:	State:	Zip Code:
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I, _____(person serving documents),
swear that I am at least 18 years of age; and that on the date shown above, I deposited a true
copy of the Summons and _____ Petition, in the above entitled case,
securely enclosed in an envelope with CERTIFIED MAIL POSTAGE DULY PREPAID, RETURN
RECEIPT REQUESTED, DELIVER TO ADDRESSEE ONLY, FOR THE PERSON LISTED ABOVE.

Dated _____, 20____

State of: _____
County of: _____

Signed and sworn to before me on _____, 20____ by
_____.

(Notary Public or Clerk of Court)

If Notary, my commission expires: _____