STAT	ATE OF NORTH DAKOTA	IN DISTRICT COURT	
COUNTY OF		JUDICIAL DISTRICT	
	IN THE MATTER OF THE GU	ARDIANSHIP/CONSERVATORSHIP OF	
	AFFIDAVIT	OF SERVICE BY MAIL	
(M	May serve multiple persons ONLY IF enve	elopes are mailed same day from same Post Office.)	
The	e person serving court documents by m	ail states:	
1.	My name is	(person who mailed	
docu	cuments). I am at least 18 years of age.		
2.	List of Court Documents Served (check all that apply): (Check <u>only</u> the documents that were served. Use "Other" to write the title of each document served that is not already listed.)		
	Notice of Petition to Accept Translate;	nsfer of Guardianship/Conservatorship to Another	
	☐ Petition to Accept Transfer of G	uardianship/Conservatorship to Another State;	
	Provisional Order Granting/Den Guardianship/Conservatorship t	. •	
	☐ Request for Appointment of Gua	ardian Ad Litem by Other Interested Person;	
	☐ Request for Appointment of Gua	ardian Ad Litem by Ward or Protected Person;	
	☐ Order for Appointment of Guard	dian Ad Litem (Proposed).	
	Other:		
	☐ Other:		
3.	Service by Mail: I served a true and	correct copy of each of the court documents listed	
in Pa	Paragraph 2 by mailing them, enclosed in	n an envelope, by First-Class mail, postage prepaid,	
and	thy denositing them in the United State	s Mail directed to each person listed in Paragraph 5	

4.	Date and Post Office Location of Service by Mail:				
Date	Cour	rt Documents Were Served by	Mail:		
Unite	d Sta	ates Post Office Location:			
(city)			(county)	(state)	
5.	Pe	erson or Persons Served by Ma	il:		
	1.	Name of Person Served:			
		Mailing Address:			
		City, State, Zip Code:			
	2.	Name of Person Served:			
		Mailing Address:			
		City, State, Zip Code:			
	3.	Name of Person Served:			
		City, State, Zip Code:			
	4.	Name of Person Served:			
		Mailing Address:			
		City, State, Zip Code:			
6. stated	I declare, under penalty of perjury under the law of North Dakota, that everythined in this Affidavit of Service by Mail is true and correct.				
	Sig	gned on	(<i>date</i>), in	County	
		(State),	(Country).		
Signature			Printed Name		
Address			City, State, Zip Code		
Telephone Number			Email Address		

4.