
(your name)

(your street address)

(city, state, zip code)

(your phone number)

MONTANA _____ JUDICIAL DISTRICT COURT,
(number of district in which your county is located)
_____ COUNTY
(name of your county)

_____,) **Your Case No.** _____
)
)
Plaintiff,)
) **AFFIDAVIT OF SERVICE**
vs.)
)
_____,)
)
Defendant.)

I, _____, swear (or affirm) under oath that:
(print your name)

I served a copy of the attached _____
(name of each of the documents that you filed in Court)

upon _____, by
(name of the opposing party)

mailing a true and correct copy on the _____ day of
(date)
_____, _____, postage prepaid and addressed as follows:
(month) (year)

(opposing party's name or name of opposing party's attorney, if he/she has one)

(opposing party's street address or street address of his/her attorney)

(city, state, zip code)

hand delivering a true and correct copy on the ____ day of _____

(date)

_____, _____, to:

(month)

(year)

(opposing party's name or name of opposing party's attorney, if he/she has one)

DATED this ____ day of _____, _____.

(date)

(month)

(year)

(Your signature)

State of _____

County of _____

SIGNED AND SWORN (OR AFFIRMED) to before me on _____, 20____

by _____.

Notary Public for the State of _____

Printed name of notary _____

Title or rank: _____

Residing at _____

My Commission Expires: _____