

AFFIDAVIT OF SERVICE NORTH DAKOTA SUPREME COURT SFN 17269 (GN-10) (Rev. 07-2019)

STATE OF NORTH DAKOTA

County of

Name of petitioner:				
Name of respondent:				
Name of person providing service:				
Address:	City:		State:	Zip Code:
Documents served:				
Date received for service:				
Date served:	Time served: □ a.m. □p.m.	County in which documents were served:		

State of North Dakota)) ss. County of)				
I certify under penalty of perjury that the foregoing is true and correct. I received the documents listed on the above date. I served the documents on the respondent on the date and time and in the county as indicated above.				
I further certify that I am over the age of 18 years and not an interested party to the above proceeding.				
X				