

**State of Minnesota**

**District Court**

County \_\_\_\_\_

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Case Type: Dissolution without Children

**In Re the Marriage of:**

\_\_\_\_\_  
Name of Petitioner

and

**Affidavit of Personal Service**

\_\_\_\_\_  
Name of Respondent

STATE OF MINNESOTA )  
 ) SS  
COUNTY OF \_\_\_\_\_ )  
(County where Affidavit signed)

I, \_\_\_\_\_, being sworn, state that I am at least  
(Name of person who hand-delivered documents)

18 years of age having been born on \_\_\_\_\_, and that on \_\_\_\_\_

\_\_\_\_\_, I served the \_\_\_\_\_  
(list all papers handed to the other party)

\_\_\_\_\_ upon \_\_\_\_\_  
(list all papers handed to the other party) (Name of other party)

by handing a true and correct copy of the documents to him/her.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Person Who Served Documents

(Sign only in front of notary public or court administrator.)

Name: \_\_\_\_\_

Sworn/affirmed before me this

Address: \_\_\_\_\_

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

City/State/Zip: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Notary Public \ Deputy Court Administrator