Sta	te of Minnesota			<b>District</b> Court
Cou	inty		Judicial District:	
			Court File Number:	
			Case Type:	Juvenile
In t	the Matter of the Welfare of	the Child(ren)	of:	
			Affida	wit of Service:
	Parent	Legal Custo		Intervention as a
				a Matter of Right
				a matter of hight
	Parent	Legal Custo	odian	
т			state that on	I served the
1, (Na	ume of person who mailed or hand delive	ered documents)	_, state that on(Date so	, I served the ervice made)
	ice of Intervention as a Party as a			
INUL		•	y (check one).	
	Hand-delivering the docu	iment; OR		
	Mailing the document			
to tł	ne following person(s) at the follo	owing addresses:		
1.				
	First	Middle		Last
	Street Address			Apt. No.
	City	Country		State and Zip
	City	County		State and Zip
2.	E:4	Middle		
	First	Middle		Last
	Street Address			Apt. No.
				1
	City	County		State and Zip
3.				
	First	Middle		Last
	Street Address			Apt. No.
	<u></u>			0
	City	County		State and Zip
4.				
	First	Middle		Last

	Street Address		Apt. No.
	City	County	State and Zip
5.			
2.	First	Middle	Last
	Street Address		Apt. No.
	City	County	State and Zip
6.			
	First	Middle	Last
	Street Address		Apt. No.
	City	County	State and Zip
7.			
	First	Middle	Last
	Street Address		Apt. No.
	City	County	State and Zip
8.			
	First	Middle	Last
	Street Address		Apt. No.
	City	County	State and Zip

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116

Dated	Signature	
	Name:Address:	
County and state where signed	City/State/Zip:	
	Telephone:	
	Email:	