**State of Minnesota District Court** Judicial District: County of: Court File Number: Case Type: Dissolution without Children In Re the Marriage of: Affidavit of Service by Mail Petitioner (first, middle, last) and Respondent (first, middle, last) I, \_\_\_\_\_\_, state that I am at least 18 years of age having been born on \_\_\_ and that on \_\_\_\_\_, I served the following papers: (List all papers mailed to the other party) by placing in an envelope a true and correct copy of each document addressed to , State of in the City of \_\_\_\_\_ Zip Code \_\_\_\_\_ and depositing the envelope, with sufficient postage, in the United States at the Post Office located in the City of in the State of \_\_\_\_\_\_. I declare under penalty of perjury that everything that I have stated in this document is true and correct. Minn. Stat. § 358.116. Signature Name: County and State where signed Address: City/State/Zip: Telephone: E-mail address:

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