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| **State of Minnesota Gobolka Minnesota** |  | **District Court Probate Division** | |
|  |  | **Maxkamadda Degmada Qeybta Dhaxal-qeybinta** | |
| County/Deegaanka |  | Judicial District Garsoorka Degmada: |  |
|  |  | Court File Number Lambarka Feylka Maxkamadda: |  |
|  |  | Case Type Nooca Kiiska: | Guardianship/Conservatorship  Masuul/Ilaaliye |

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| In Re: the Guardianship of  Jawaab: Masuulka |  | Affidavit of Service (Annual Reporting - Guardianship) Caddeynta Gudbinta Waraaqaha (Warbixinta Sannadka - Ilaaliyaha) |  |

My name is/Magacaygu waa , and I am at least 18 years old/oo waxaan gaaray 18 jir. I served papers for the guardianship case as follows/Waxaan waraaqaha kiiska ilaalinta u gudbiyey sida hoose:

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| --- | --- | --- | --- | --- | --- | --- |
| **Person Subject to Guardianship:**  **Qofka Masuulka Laga Yahay:** | | | |  | | Forms Served *(check all that apply)* Foomamka la gudbiyey *(calaamadi intii ku khuseysa)*: |
| Name/Magaca: | |  | |  | | *Personal Well-Being Report Warbixinta Fayaqabka Shakhsiga* |
| Served at Waxaa loo gudbiyey/ | |  | |  | | *Annual Notice of Right to Petition for Termination or Modification of Guardianship or Other Relief Ogeysiiska Sannadka ee Codsiga Xuquuqda Joojinta ama Beddelaadda Masuuliyadda ama Hawl Kale* |
| (location)/ (goobta): | |  | |  | | *Bill of Rights/Sharciga Xuquuqaha* |
|  |  | | |  | |  |
| Date Of Service Taariikhda Gudbinta Waraaqaha: | | |  |  | | Other/Wax kale: |
|  |  | | |  | |  |
| How Served Sida Loo Gudbiyeye: | | | By Mail (United States Mail) Boosto Ahaan (Boostada Mareykanka) | | By Personal Service (hand-delivered) Shakhsi Ahaan (gacan-ka-dhiib) | |

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| **Person of Interest Qofka la Rabo:** | | | |  | | Forms Served *(check all that apply)* Foomamka la gudbiyey *(calaamadi intii ku khuseysa)*: |
| Name/Magaca: | |  | |  | | *Personal Well-Being Report Warbixinta Fayaqabka Shakhsiga* |
| Served at Waxaa loo gudbiyey/ | |  | |  | | *Annual Notice of Right to Petition for Termination or Modification of Guardianship or Other Relief Ogeysiiska Sannadka ee Codsiga Xuquuqda Joojinta ama Beddelaadda Masuuliyadda ama Hawl Kale* |
| (location) (goobta): | |  | |  | | *Bill of Rights/Sharciga Xuquuqaha* |
|  |  | | |  | |  |
| Date Of Service Taariikhda Gudbinta Waraaqaha: | | |  |  | | Other/Wax kale: |
|  |  | | |  | |  |
| How Served Sida Loo Gudbiyey: | | | By Mail (United States Mail) Boosto Ahaan (Boostada Mareykanka) | | By Personal Service (hand-delivered) Shakhsi Ahaan (gacan-ka-dhiib) | |

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| **Person of Interest Qofka la Rabo:** | | | |  | | Forms Served *(check all that apply)* Foomamka la gudbiyey *(calaamadi intii ku khuseysa)*: |
| Name/Magaca: | |  | |  | | *Personal Well-Being Report Warbixinta Fayaqabka Shakhsiga* |
| Served at Waxaa loo gudbiyey/ | |  | |  | | *Annual Notice of Right to Petition for Termination or Modification of Guardianship or Other Relief Ogeysiiska Sannadka ee Codsiga Xuquuqda Joojinta ama Beddelaadda Masuuliyadda ama Hawl Kale* |
| (location) (goobta): | |  | |  | | *Bill of Rights/Sharciga Xuquuqaha* |
|  |  | | |  | |  |
| Date Of Service Taariikhda Gudbinta Waraaqaha: | | |  |  | | Other/Wax kale: |
|  |  | | |  | |  |
| How Served Sida Loo Gudbiyey: | | | By Mail (United States Mail) Boosto Ahaan (Boostada Mareykanka) | | By Personal Service (hand-delivered) Shakhsi Ahaan (gacan-ka-dhiib) | |

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| **Person of Interest Qofka la Rabo:** | | | |  | | Forms Served *(check all that apply)* Foomamka la gudbiyey *(calaamadi intii ku khuseysa)*: |
| Name/Magaca: | |  | |  | | *Personal Well-Being Report Warbixinta Fayaqabka Shakhsiga* |
| Served at Waxaa loo gudbiyey/ | |  | |  | | *Annual Notice of Right to Petition for Termination or Modification of Guardianship or Other Relief Ogeysiiska Sannadka ee Codsiga Xuquuqda Joojinta ama Beddelaadda Masuuliyadda ama Hawl Kale* |
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|  |  | | |  | |  |
| How Served Sida Loo Gudbiyey: | | | By Mail (United States Mail) Boosto Ahaan (Boostada Mareykanka) | | By Personal Service (hand-delivered) Shakhsi Ahaan (gacan-ka-dhiib) | |

*If you need more space, add another sheet of paper  
Haddii aad u baahato qoraal dheeraad ah, soo raaci waraaq.*

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

Waxaan sharciga ciqaabta dhaarta beenta ah ku caddeynayaa wax kasta oo aan ku sheegay waraaqdan in ay yihiin run iyo sax. Sharciga Minn. Stat. § 358.116.

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| Dated/Taariikhda |  | Signature of Person Who Served the Forms  Saxiixa Qofka Gudbiyey Foomamka | |
|  |  | Name Magaca: |  |
|  |  | Address Cinwaanka: |  |
| County and state where signed Deegaanka iyo gobolka saxiixa lagu sameeyey |  | City/State/Zip Magaalada/Gobolka/Lambarka Boostada Xaafadda (Zip): |  |
|  |  | Telephone/ Taleefanka: |  |
|  |  | Email Boostada Intarnetka (Email): |  |