**State of Minnesota District Court**

County of: Court File Number:

Judicial District: Case Type: Guardianship – At-Risk Juvenile

**In Re the Guardianship of:**

 Petitioner

# Affidavit of Service to Proposed Guardian(Petition for Guardianship of At-Risk Juvenile) (GAC905)

My name is , and I am at least 18 years old. I served the **Petition for Guardianship of At-Risk Juvenile** as follows:

## Who Was Served: Proposed Guardian Date of Service:

Name:

Address:

City, State, Zip:

## How Served:

[ ]  By Mail (United States Mail)

[ ]  By Personal Service (hand-delivered by someone other than the Petitioner)

## Who Was Served: [ ]  Current Guardian Date of Service:

Name:

Address:

City, State, Zip:

## How Served:

[ ]  By Mail (United States Mail)

[ ]  By Personal Service (hand-delivered by someone other than the Petitioner)

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

Date: Signature:

Printed Name:

County and state where signed: Address:

 City/State/Zip:

 Email:

 Phone: