

1 **Name:** \_\_\_\_\_

2 **Method:**  **Personal Service**

3 Name of Server: \_\_\_\_\_

4 Date, Time, Location: \_\_\_\_\_

5 \_\_\_\_\_

6 \_\_\_\_\_

7 Name of person accepting service: \_\_\_\_\_

8  Person Served Refused to Sign OR

9 Signature of served person: \_\_\_\_\_

10  If not the individual to be served, I affirm that the individual accepting  
11 service was of suitable discretion and age sixteen (16) or older.

12  **Mail**

13 Address used: \_\_\_\_\_

14 \_\_\_\_\_

15 \_\_\_\_\_

16 Mail Delivery Service used: \_\_\_\_\_

17 Date mailed: \_\_\_\_\_

18 Proof attached:  return receipt  other delivery documentation

19  **Publication**

20  **By newspaper.** Printed copy of the publication with an affidavit  
21 indicating the manner and dates of publication are attached.

22  **By community posting.** Printed copy of the publication including a  
23 copy of any documents that were posted following Rule of Civil  
24 Procedure 3.1(f)(6), with an affidavit indicating the manner and dates of  
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