**State of Minnesota District Court**

Judicial District: Court File Number: Case Type: Housing

County of:

Plaintiff (first, middle, last)

vs.

# Affidavit of Personal or Substitute Service

Defendant (first, middle, last)

I, state that I am at least 18 years of age

(Name of person who hand-delivered documents)

having been born on and that on I served the attached

*Summons* and *Complaint* in an Eviction Action upon the named defendant(s)

( Name of defendant(s))

# at: .

(street address, city, state, zip code)

by personally handing a true and correct copy of the document to: the defendant(s) named above

# OR

(Name of person you handed the papers to, if someone other than defendant)

discretion residing with the defendant(s).

, a person of suitable age and

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

Dated:

Signature

Name:

County and State where signed

Address: City/State/Zip: Telephone:

E-mail address:

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