State Of North Dakota			In District Court		
County Of			Judicia	l District	
	Plaintiff/Petitioner,	) )	Case No		
VS		) )	Declaration Of Office Service		
	Defendant/Respondent.	) )			

(A separate Declaration is required for each person served.)

## The person serving court documents at the office states:

1. My name is \_\_\_\_\_\_(person who delivered documents to the office).

2. I am at least 18 years of age. I am <u>not</u> a party <u>or</u> interested in the above named civil

## matter.

**3.** List of Court Documents Served (write the title of each document served on a separate line. Checkmark ( $\checkmark$ ) next to each document listed):

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•		
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4. Date, Time, and Address of Of	fice Service:	
Date:	Time:	_ 🗖 a.m. ( <i>or</i> ) 🗖 p.m.
Address:		
(street address)	(city)	(zip code)
NDLSHC	Page <b>1</b> of <b>2</b>	Decl OS Rule 5/Rev Apr 2024

5. Office Service:

As required by Rule S	5(b)(3) of the No	rth Dakota Rules of Civil Pı	rocedure, I served a true
and correct copy of each of	the court docum	ents listed in Paragraph 3	to
		(name of person s	erved) at the date, time
and address of their office li	sted in Paragrap	h 4 by ( <i>choose one</i> ):	
Ieaving the court of	documents with		(name),
who is a person in	charge.		
Ieaving the court of	documents in a c	conspicuous place in the of	ffice, specifically:
		(de.	scribe), because there is
no person in char	ge.		
I know the person I served is	s the person inte	nded to be served becaus	e ( <i>explain how you</i>
identified the person):			
6. I declare, under pena	alty of perjury un	nder the law of North Dakc	ota, that everything I
stated in this Declaration of	Office Service is	true and correct.	
Signed on		( <i>date</i> ) in	(city),
	_ (county),	(state),	(country).
(Signature)			
(Printed Name)			
(Address)			
(City, State, Zip Code)			
Phone Number:			
Email Address:			