

IN THE DISTRICT COURT
____ JUDICIAL DISTRICT

Probate No. _____

Subscribed and sworn to before me on this _____ day of _____, 20_____.

WITNESS my hand and official seal.

Notarial Officer

My Commission Expires:

CERTIFICATE OF SERVICE

I certify that on _____ (date) the original of this document was filed with the Clerk of District Court; and, a true and accurate copy of this document was served on each of the following:

*Must be sent to every party to the case or their attorney if represented. Print the other party's or other party's attorney's **Name** and **Address**. You must indicate **Method of Service**.*

Other Party/Other Party's Attorney's Name and Address	Method of Service
	☐ Hand Delivery ☐ Faxed to this number: _____ ☐ Placed in United States Mail
	☐ Hand Delivery ☐ Faxed to this number: _____ ☐ Placed in United States Mail
	☐ Hand Delivery ☐ Faxed to this number: _____ ☐ Placed in United States Mail
	☐ Hand Delivery ☐ Faxed to this number: _____ ☐ Placed in United States Mail

Your signature

Print name