



CIRCUIT COURT FOR _____, MARYLAND

Located at _____ City/County Case No. _____
Court Address

Plaintiff _____ vs. Defendant _____
Address _____ Address _____
City, State, Zip _____ Telephone _____ City, State, Zip _____ Telephone _____

**AFFIDAVIT OF SERVICE
(Hand Delivery/Private Process)
(Md. Rule 2-121)**

NOTE: This form provides proof to the court that copies of documents filed in the above case by one party have been provided to the other party. Complete this form if one of the individuals listed above has asked you to hand deliver, or serve, documents to the other person in this case. Deliver, or serve, the ORIGINAL court-issued summons and the document(s) to the person indicated. Attach a copy of the summons to this notice before submitting this notice to the court.

I certify that I served _____ . I served them at _____ a.m. p.m.
Name of person served Time
on _____ at _____ . I served them with a copy of the
Date Address
documents checked below, which were previously filed with the court.

Check all that apply:

- Writ of Summons _____
Issue date of the summons for the complaint/petition/motion listed below.
- Complaint/Petition/Motion _____
Name of complaint/petition/motion
- Domestic Case Information Report (form CC-DCM-001)
- Financial Statement
- Show Cause Order and Petition _____
Type of petition
- Other (list of all other documents served): _____

I completed the delivery, or service, in the following manner (*select one*):

- I personally handed the documents to the plaintiff defendant, whose name is _____
- I left the papers with _____, who lives at the above-listed address and is of suitable age and discretion and whose relationship to the person served is _____

The above-listed address is the plaintiff's defendant's residence or usual place of abode.

Description of person served: Race _____ Sex _____ Height _____ Weight _____ Age _____

I certify that I am at least 18 years old and I am NOT the plaintiff or the defendant.
I solemnly affirm under the penalties of perjury that the contents of this document are true to the best of my knowledge, information, and belief.

_____	_____
Date	Signature
_____	_____
Printed Name	Telephone Number
_____	_____
Address	Fax
_____	_____
City, State, Zip	E-mail