

**IN THE TRIBAL COURT OF THE
PRAIRIE ISLAND INDIAN COMMUNITY**

STATE OF MINNESOTA

Attorney, Party Without Attorney or Governmental Agency
(Name, State bar number (if applicable), and address)

Telephone Number:
Fax Number:
Attorney for:

<p style="text-align: center;">_____, Plaintiff.</p> <p style="text-align: center;">v.</p> <p style="text-align: center;">_____, Defendant.</p>	<p style="text-align: center;">CASE NO. _____</p> <p style="text-align: center;">PROOF OF PERSONAL SERVICE</p> <p>Date: Time: Judge:</p>
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1. At the time of service, I was at least 18 years of age and not a party to this case, and I served copies of the following documents: *(Specify and attach additional sheets, if necessary.)*

2. a. Upon *(Name of party.)* _____; *(For civil cases, specify the nature and status of the party's involvement in the case, i.e. plaintiff, defendant, cross-complainant, etc.; and the name, address and phone number of the party's counsel of record, if any.)*

b. Person served: individual in item 2a; attorney for party named in item 2a; other *(Specify name and title or relationship to the party named in item 2a.):*

c. Address of person served:

d. Date and time of delivery:

3. I served the individual named in item 2
- a. by personally delivering the copies.
 - b. by leaving copies at the attorney's office, in an envelope or package clearly labeled to identify the attorney being served,
 - with a receptionist or, with a person having charge thereof.
 - in a conspicuous place in the office between the hours of eight in the morning and five in the afternoon.
 - c. by leaving copies at the individual's residence with some person of not less than 18 years of age. (*If service was to a party and not an attorney, delivery was made between the hours of 8:00 a.m. and 6:00 p.m.*).
4. Person serving (*Name, address and telephone number.*):

5. Fee for service was \$ _____.

I declare under penalty of perjury under the laws of the Prairie Island Indian Community that the foregoing is true and correct.

Date:

(Type Name or Print)

(Signature of Person Completing Form)

INFORMATION SHEET FOR PROOF OF PERSONAL SERVICE

A person at least 18 years of age or older must serve these documents. There are three ways to serve documents: (1) personal delivery, (2) by mail and (3) by facsimile. If the documents are being served by mail or facsimile, you must use the corresponding form. The person who serves the documents must complete a proof of service form for the documents being served. **You cannot serve documents if you are a party to the action.**

INSTRUCTIONS FOR THE PERSON WHO SERVES THE DOCUMENTS (TYPE OR PRINT IN BLACK INK)

You must complete a proof of service for each package of documents you serve.

Complete the top section of the proof of service form as follows:

Above the case name box: In this area, type or print the name, address phone number and fax number (*if applicable*) of the attorney or person representing the party serving the documents.

In the case name box: Type or print the name of the plaintiff and the defendant in this action. Use the same names set forth in the documents you are serving. To the left of that information, print the case number, the date and time set for the hearing or matter before the court and the name of the judge to hear the matter, if known.

1. You are stating that you are at least 18 years of age and that you are not a party to this action.
2.
 - a. Type or print the name of the side that is being served (i.e. plaintiff, defendant, cross-complainant, etc.).
 - b. Type or print the name of the person actually served and their relationship to the party named in item 2a.
 - c. Type or print the address of the person served.
 - d. Type the print the date and time personal service was accomplished.
3. Type or print the method of personal service (either actual or substitute. If substitute, specify how substitute service was accomplished).
4. Type or print the name of the person who performed the personal service.
5. By signing this form, you are stating under penalty of perjury that the information you have provided is true and correct.

Print your name, fill in the date, and sign the form.