

MAINE JUDICIAL BRANCH

Plaintiff

DISTRICT COURT

Location (Town): _____

V.

Docket No.: _____

Defendant

AFFIDAVIT AND REQUEST FOR SERVICE

M.R.S.C.P. 4(b), 12(a)(2)

I, _____, depose and say:

I am the plaintiff or representative of the plaintiff in this case.

I request the clerk to arrange for service of the (*choose one*): Statement of Claim Notice of Disclosure Hearing.

In this calendar month (from this day last month until today), I have filed less than three (3) Small Claims cases in the State of Maine.

The service address for the defendant is:

By completing and filing this form, I certify that I understand the following:

- If I do not provide the complete service address, the clerk will not arrange for service.
- The clerk will attempt to make service by U.S. Mail. Service by U.S. Mail is complete when an acknowledgment of service is signed and returned to the clerk's office. If a signed acknowledgment is not returned within 20 days of the date of mailing, service by U.S. Mail is unsuccessful.
- If service by U.S. Mail is unsuccessful, the clerk will next arrange for service by Sheriff **only if I filed a request to have service costs waived and it was approved by the court.**
- If the clerk is unable to complete service, I am responsible for completing service by another method listed in the Maine Rules of Small Claims Procedure, and I am responsible for payment of all service costs.
- If the clerk is unable to complete service, I will be notified and provided with a copy of the Statement of Claim/Notice of Disclosure Hearing and any related paperwork needed to complete service.

ADA Notice: The Maine Judicial Branch complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation, contact the Court Access Coordinator, accessibility@courts.maine.gov, or a court clerk.

Language Services: For language assistance and interpreters, contact a court clerk or interpreters@courts.maine.gov.

MAINE JUDICIAL BRANCH

I swear under penalty of perjury that the above statements are true and correct. I understand that these statements are made for use as evidence in court and that I am subject to prosecution for perjury punishable by up to 5 years in prison and a fine of up to \$5,000.00 if I give false information to the court.

Date (mm/dd/yyyy): _____



Signature of Affiant

Printed Name of Affiant

Mailing Address of Affiant

Personally appeared the above-named _____
and made oath that the foregoing statements are true.

Date (mm/dd/yyyy): _____



 Notary Public Attorney Clerk

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