The Family Court of the State of Delaware

In and For [ ]  New Castle County [ ]  Kent County [ ]  Sussex County

**AFFIDAVIT OF SERVICE PURSUANT TO 10 Del. C. §3104(d)**

## Petitioner v. Respondent

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name |  | Name |  | File Number |
|       |  |       |  |  |
| Street Address |  | Street Address |  |       |
|       |  |       |  |  |
| P.O. Box Number |  | P.O. Box Number |  | Petition Number |
|       |  |       |  |  |
| City/State/Zip Code |  | City/State/Zip Code |  |       |
|       |  |        |  |  |
| Attorney Name |  | Attorney Name |  |
|       |  |       |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | I am |       | the Petitioner or person duly authorized |
|  | to act for the Petitioner in this case. |  |
| 2. | The Respondent  |       | is a non-resident of the State of |
| Delaware who, on information and belief, resides at  |
|  |       |
|  |       |
|  |       |
| 3. | [ ]  On |       | I mailed to Respondent by return receipt mail a copy of the summons and petition. |
|  | I also included any additional materials originally filed with the Court. The form of mail service I used was  |
|  |  [ ] USPS Certified [ ] USPS Registered |

|  |  |  |
| --- | --- | --- |
|  | [ ] Other (Please Specify FedEx, DHL, ETC.):  |       |
| 4. | [ ]  On  |       |  I received the return receipt and that receipt was returned: |
|  | [ ] Received [ ] Refused [ ] Unclaimed *If returned “received” or “refused”, the return receipt is attached to this affidavit*. |

|  |  |  |
| --- | --- | --- |
| [ ]  On |       |  Respondent was served in a manner provided by law in the state where the  |
| Respondent was served. Provide detail and any supporting documentation. |
|       |
|       |
|       |

|  |  |  |
| --- | --- | --- |
| [ ]  On |       |  Respondent was personally served in a manner permitted for service in Delaware. |
| A Return of Service Form 277 must be attached.  |

I swear that the foregoing statements are true and correct to the best of my knowledge and belief.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Affiant |  | Date |
| Sworn to and subscribed before me this  |       | day of |       | , |       |
|

|  |  |
| --- | --- |
|  |  |
|  | Clerk of Court/Notary Public |

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