Mailing Address (if not protected): City, State, and Zip Code: Phone Number: Email Address:				
AZCA	ARES Number (if applicable):			
State Bar Number (if applicable):Representing: Representing: Respondent				
Repre	esenting: Self Petitioner	□ Respondent		
	SUPER	RIOR COURT OI MOHAVE COU		
			Case Number:	
(Name of Petitioner/Plaintiff) AND			AFFIDAVIT OF SERVICE BY CERTIFIED MAIL A.R.C.P. Rule 4.2(c)	
(Name of Respondent/Defendant)		_	(Non Family court cases only)	
			(Non Failing Court cases only)	
1.	I am familiar with the facts stated in this Affidavit, and I make this Affidavit to show that I have served the court papers on the other party by certified mail, postage prepaid, return receipt requested, pursuant to Arizona rules of Civil Procedure, Rule 4.2(c).			
	Person served (name of other party):			
	Address where other party was served:			
	Date of receipt by the other party:			
	Date of return of receipt to sender:			
2.	I know that the other party is located outside the State of Arizona. the following documents were sent to the other party by certified mail: (List all of the documents sent to the other party):			
	These court papers were received by this Affidavit as required by Arizona I		own by the receipt, a copy of which is attached to e, Rule 4.2(c).	
OATH	OR AFFIRMATION			
	of Arizona) ave County) ss.			
l swea	ar or affirm that the information on this o	document is true and co	orrect under penalty of perjury.	
Signa	ture of Sender		Date	
Sworr	n to or Affirmed before me this	day of	, 20	
		•	· · · · · · · · · · · · · · · · · · ·	
Му Со	ommission Expires:			
		De	eputy Clerk or Notary Public	

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