

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR LINN COUNTY
SMALL CLAIMS DEPARTMENT

_____ Plaintiff(s)

**PROOF OF SERVICE/
AFFIDAVIT OF MAILING**

vs

Case No. _____

_____ Defendant(s)

PERSONAL SERVICE

I hereby certify that I am a competent person over the age of 18 years, a resident of the State of Oregon, and not a party to nor an attorney in the entitled action. I further certify that I served the defendant(s)

_____ in the entitled action, by personally delivering to the within named defendant(s) a copy of the CLAIM & NOTICE OF CLAIM on the ____ day of _____, 20____ at _____ am/pm at _____
street address city state zip

Server: _____ (signature)

Print Name: _____

Address: _____

City, State, Zip: _____

SUBSTITUTE/OFFICE SERVICE (If you complete this section you must complete the affidavit of mailing area below)

I hereby certify that I am a competent person over the age of 18 years, a resident of the State of Oregon, and not a party nor an attorney in the entitled action. I further certify that I served defendant(s) _____ a copy of the CLAIM & NOTICE OF CLAIM on the ____ day of _____, 20____ by serving _____, a member of defendant's household/person in charge of the office, over 14 years of age at ____ am/pm, at the usual place of abode/office of defendant(s) at _____
street address city state zip

Server: _____ (signature)

Print Name: _____

Address: _____

City, State, Zip: _____

AFFIDAVIT OF MAILING

State of Oregon

County of _____

I do hereby swear that on the ____ day of _____, 20____ I deposited in the post office at _____, Oregon, a sealed envelope, the postage on which was duly paid, which contained a true copy of the CLAIM & NOTICE OF CLAIM and Notice of Substitute Service in the above entitled matter addressed to the above named defendant(s) address: _____
street address city state zip

Plaintiff/Agent for Plaintiff _____

Subscribed and sworn to before me this ____ day of _____, 20_____.

Notary Public for Oregon/ Clerk
My commission expires _____