

# AFFIDAVIT OF SERVICE

**AFFIDAVIT OF SERVICE**

Fill in:  
your name and address;

I name \_\_\_\_\_ occupation \_\_\_\_\_  
of address \_\_\_\_\_

Swear that:

Affirm that:

the name of the party or  
other person served;

I served \_\_\_\_\_

the date service took  
place

on \_\_\_\_\_  
date

the address or location  
service took place.

at \_\_\_\_\_

Tell what was served.  
Check appropriate  
boxes.

- with  a copy of the "Summons to a Payment Hearing" attached.  
 a copy of the "Summons to a Default Hearing" attached.  
 a blank "Statement of Finances"  
 a blank "Supporting Material Cover Sheet"  
 \_\_\_\_\_

Tell how service took  
place

- by  leaving a copy of it with them  
 as directed by the court by  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Do not sign your  
affidavit until a  
commissioner for the  
taking of affidavits is  
present.

\_\_\_\_\_  
signature of person who served the document

A commissioner for the  
taking of affidavits will  
administer the oath or  
affirmation and witness  
your signature.

**Sworn/affirmed before me on**

\_\_\_\_\_  
date

**at**

\_\_\_\_\_  
location where affidavit is sworn or affirmed

\_\_\_\_\_  
signature of commissioner for taking affidavits for British Columbia