

# The Family Court of the State of Delaware

In and For  New Castle  Kent  Sussex County

Petitioner			Respondent				
Name			Name			File Number	
Street Address			Street Address				
Apt. or P.O. Box Number			Apt. or P.O. Box Number			Petition Number	
City		State	City		State	Zip Code	
Date of Birth			Date of Birth			Type of Filing	
Attorney Name and Phone Number			Attorney Name and Phone Number				

## AFFIDAVIT OF MAILING

A proceeding involving the above-captioned case having been previously filed in this court, I, the:

(Check **ONE**)       Petitioner/Movant       Attorney for Petitioner/Movant  
 Respondent/Movant       Attorney for Respondent/Movant

affirm that a true and correct copy of this: (Check **ONE** and complete as appropriate.)

Answer to Petition       16(C) Financial Report  
 Motion or       Response to Motion \_\_\_\_\_  
(Type of Motion)

Other: \_\_\_\_\_  
(Other type of document mailed to opposing party/attorney)

was placed in the U.S. Mail on this date, \_\_\_\_\_, and sent first class postage pre-paid to the: (Check **ONE** and complete as appropriate.)

Opposing party at the address listed above  
 Attorney for opposing party at the address listed below

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

SWORN TO AND SUBSCRIBED before me this date, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public or Clerk of Court

\_\_\_\_\_  
Party/Movant/Attorney