
(your name)

(your street address)

(city, state, zip code)

(your phone number)

MONTANA _____ JUDICIAL DISTRICT COURT,
(number of district in which your county is located)
_____ COUNTY
(name of your county)

In the Matter of the Estate of,) **Probate Case No.**
)
)
_____,) **AFFIDAVIT OF SERVICE**
(name of the deceased))
)
Deceased.)

I, _____, swear (or affirm) under oath that:
(print your name)

I served a copy of the attached Notice and Information to Heirs and Devisees

upon _____, by
(name of recipient)

mailing a true and correct copy on the _____ day of
(date)
_____, _____, postage prepaid and addressed as follows:
(month) (year)

hand delivering a true and correct copy on the _____ day of
(date)

_____, _____, to:
(month) (year)

(opposing party's name or name of opposing party's attorney, if he/she has one)

DATED this _____ day of _____, _____.
(date) (month) (year)

(Your signature)

State of _____
County of _____

SIGNED AND SWORN (OR AFFIRMED) to before me on _____, 20____
by _____.

Notary Public for the State of _____
Printed name of notary _____
Title or rank: _____
Residing at _____
My Commission Expires: _____