



CANADA
YUKON TERRITORY
Small Claims Court

O.I.C. 1995/152

Form #4

AFFIDAVIT OF SERVICE

File # _____

Plaintiff(s)

Name, address, telephone 1. _____
2. _____

Defendant(s)

Name, address, telephone 1. _____
2. _____

I,

Name _____
of the City of _____

City _____
in the Yukon Territory, **MAKE OATH AND SAY (or AFFIRM)** that I have served a true copy of the following documents:

Name of document(s) _____

now produced and shown to me and marked Exhibit:

Identify exhibits alphabetically _____
_____ respectively, to this my Affidavit, on

Name of defendant _____

Check one box personally on

Date _____

OR

by leaving a copy of the claim or document in a sealed envelope addressed to the defendant with

Name of person _____
at _____

Address _____
and mailing another copy of the claim or document addressed to the defendant at

Address of defendant _____
on _____

Date _____

OR

by mailing a copy of the claim or document to the defendant by certified mail at

Address of defendant _____
on _____

Date _____

SWORN before me this _____ day of _____,

20____, at _____ in the Yukon Territory.

SIGNATURE

SIGNATURE OF NOTARY PUBLIC IN AND FOR THE YUKON TERRITORY

Reference: Sections 17, 19-24, 78, Small Claims Court Regulations