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| --- | --- | --- |
| **STATE OF WISCONSIN, CIRCUIT COURT,** **COUNTY** | |  |
| IN THE MATTER OF THE ESTATE OF    Name | Amended  **Affidavit of Service**  **(Probate)**  Case No. |

I, [Name]       of [City]       ,

State of       , being sworn, state that on [Date]       , I provided copies of the following documents:

|  |
| --- |
| **Documents Provided** |
|  |

the original of which is on file, OR

a copy of which is attached (no original on file)

to the following named persons at the mailing address as listed:  **See attached**

|  |  |  |
| --- | --- | --- |
| **NAME** | **MAILING ADDRESS** | **TYPE OF SERVICE\*\*\*** |
|  |  |  |

**\*\*\* TYPE OF SERVICE:** Refer to Wisconsin Statutes for proper manner of service. **Type of Service:**

Personal Service

Mail

Certified mail return receipt requested

|  |  |  |  |
| --- | --- | --- | --- |
| State of  County of  Subscribed and sworn to before me on    Notary Public/Court Official    Name Printed or Typed  My commission/term expires: | | | ►  Signature    Print or Type Name    Address      Telephone Number    Date |
| Form completed by: (Name) | |  |  |
| Address | |  |
| Telephone Number | Bar Number (If any) |  |