

## INSTRUCTIONS AND FORM FOR STATEMENT OF MAILING

Please note that court staff cannot provide you with legal advice or assist you in completing these forms. The use of these forms does not guarantee you will be successful in court. It is highly encouraged that you speak with an attorney if you are needing assistance. If you have specific questions regarding the forms, you may contact the legal form helpline at 1-855-784-0004 or email UJS staff at [ujssrlhelp@uj.s.state.sd.us](mailto:ujssrlhelp@uj.s.state.sd.us). Additionally, for more information on South Dakota laws, you can also visit the South Dakota Legislature website.

### **IMPORTANT NOTICE:**

Complete this form only after you have mailed a copy of your document to the other party.

### **Complete this form by:**

- Complete the caption by filling in the county name, judicial circuit number, Plaintiff and Defendant name, and file number. All of this can be found on any previous filing completed in your case.
  - You can also contact the Clerk of Court, legal help line, or email UJS staff for this information.
- In the first paragraph, enter your name on the line provided.
  - Mark the appropriate box of what you are mailing to the opposing party. Multiple boxes can be marked.
- Enter the address of the opposing parties that you mailed the documents to.
- Enter the date you mailed the documents as well as the city and state you mailed them from.
- Sign and date.
- File with the Clerk of Court.

COUNTY OF \_\_\_\_\_

\_\_\_\_\_ JUDICIAL CIRCUIT

<p>_____</p> <p>Plaintiff</p> <p style="text-align: center;">v.</p> <p>_____</p> <p>Defendant</p>	<p>Case No.: _____</p> <p><b>STATEMENT OF SERVICE BY MAIL</b></p>
---	---

I, \_\_\_\_\_, the **Plaintiff / Defendant** (*circle one*) in the above-named case, swear under oath that I served the opposing party with the:  
(*mark all that apply*)

- Motion to/for** \_\_\_\_\_  
*(what you are asking the Court to do)*
- Affidavit in Support of Motion**
- Supporting documents/exhibits**
- Notice of Hearing**
- Responding Affidavit**

by placing a true and correct copy of the documents in an envelope addressed to the **Plaintiff / Defendant** (*circle one*) in this matter, at:

\_\_\_\_\_  
*(Opposing Party Name)*

\_\_\_\_\_  
*(Street Address)*

\_\_\_\_\_  
*(City, State, Zip Code)*

on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ and depositing the envelope, with sufficient postage, in the United States Mail I from

\_\_\_\_\_, \_\_\_\_\_  
*(City) (State)*

I declare under penalty of perjury under the law of South Dakota that the foregoing is true and correct. Signed on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ at \_\_\_\_\_.

(Date) (Month) (Year) (City or other location, and State)

\_\_\_\_\_  
**Plaintiff / Defendant** Signature (circle one)

\_\_\_\_\_  
**Plaintiff / Defendant** Name (circle one)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone Number