

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF WASHINGTON

In the Matter of: _____)

_____)
 and Petitioner,)
 _____)
 Respondent.)

Case No. _____

AFFIDAVIT IN SUPPORT OF
MOTION FOR ALTERNATIVE
FORM OF SERVICE

STATE OF _____)

County of _____)

) ss.

I, _____, being first duly sworn, say that the following is true:

1. I am the Petitioner Respondent in this case.
2. I have had no contact with the other party since (date) _____. His/Her last known address is _____, and I am not presently aware of his/her whereabouts, mailing address or how to get in contact with him/her.
3. I attempted to have the other party personally served at his or her dwelling house or usual place of abode located at _____.
Service at this address has not been successful because: _____
4. I attempted to complete substitute service on the other party but was unsuccessful because: _____
5. Check one: I attempted to complete office service on the other party but was unsuccessful because: _____
 The other party does not have an office for the conduct of business.
6. I attempted to mail the documents to the other party at the following address(es): _____ by first class mail and certified or registered mail, return receipt requested, or express mail, but was not able to get a receipt signed by the other party because: _____

7. I have have not found a post office address for the other party. I have made the following efforts to locate a post office address: _____

_____.

8. In addition to the methods described above, I have tried to locate the other party using the methods described in Exhibit A.

9. Check one:

I know of a specific location outside of Washington County where publication might reasonably result in actual notice to the other party: _____.

(List county and state)

I do not know of a specific location where publication might result in actual notice to the other party.

10. I am without funds to pay for publication by newspaper. A copy of the order deferring or waiving my filing fee is filed with the court.

Dated: _____, 20____.

 Petitioner Respondent, Signature

Print Name

Contact Address

City, State, Zip

Contact Telephone

SIGNED AND SWORN to before me this _____ day of _____, 20____, by _____

_____.

Notary Public for _____/Court Clerk

My Commission Expires: _____

I certify that this is a true copy.

(Do not sign this line on the original)

 Petitioner Respondent, Signature

I have contacted people who are or at one time were acquaintances, friends, relatives, or neighbors of the other party as follows:

Name	Relationship to Other Party	Date Contacted	Contacted by Phone, Mail, Other (describe)	Phone # and/or Address Used for Contact	Detailed Results

I have searched the Internet as follows: (If you do not have Internet access, it may be available at your local public library)

Site Address	# of Name Matches Found	Name Matches Contacted by Phone, Mail, Other (describe)	Phone # and/or Address	Detailed Results
www.whitepages.com				
www.dexknows.whitepages.com				

I have contacted utility companies, Post Offices and motor vehicle offices as follows:

Company or Agency Name and City	Date Contacted	Company or Agency Phone # and/or Address	Detailed Results

I have contacted former or likely employers as follows:

Company or Agency Name and City	Date Contacted	Company or Agency Phone # and/or Address	Detailed Results