IN THE DISTRICT COURT OF SPOKANE COUNTY WASHINGTON

_____ Plaintiff(s)	NO.
vs.	CERTIFICATE OF SERVICE
_____ Defendant(s)	

PERSONAL SERVICE

I served the Notice by delivering a true copy to the defendant personally in Spokane County, State of Washington, as follows:

Name of Defendant	**Address Where Served**	**Date of Service**
_____	_____	_____

SUBSTITUTE SERVICE

I served the Notice by delivering a true copy to the defendant's place of residence in Spokane County, State of Washington, and leaving it with a person over 12 years of age residing there, as follows:

Name of Defendant	**Residence Address**	**Name of Person Receiving Copy**	**Date of Service**
_____	_____	_____	_____

SERVICE BY MAIL (Attach both the postal receipt and the signed return receipt to this form.)

I served the Notice by depositing in the United States Post Office in Spokane County, State of Washington, a true copy of the Notice enclosed in a sealed envelope having adequate postage and sent Certified Mail, Restricted Delivery, Return Receipt Requested, as follows:

Address of Post Office	**Date Mailed**	**Addressed to Name of Defendant at:**	**Address of Defendant**
_____	_____	_____	_____

I, the undersigned, declare under penalty of perjury that the foregoing is true and correct and that I was at the time of service of the above notice(s) a resident of the State of Washington over the age of 18 years and not a party to the above numbered claim.

DATED _____ _____

Signature of Server

Server's Phone No. _____

_____

Address of Server