

STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

IN THE MATTER OF THE ESTATE OF

Amended

**Affidavit of Service  
(Probate)**

Name \_\_\_\_\_  
\_\_\_\_\_

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)