

SEMINOLE TRIAL COURT

Seminole Tribe of Florida

_____)	
)	
vs. <i>Plaintiff</i>)	
)	Case No.
_____)	
)	
<i>Defendant</i>)	
_____)	

CERTIFICATE OF SERVICE

I certify that a copy of *{name of document(s)}* _____

was [check **one** only] mailed faxed and mailed hand delivered to the person listed below on {date}

Other party or his/her attorney:

Name: _____
Address: _____
City: _____
State: _____
Zip: _____
Telephone Number: _____
Fax Number: _____
Email Address: _____

Signature of Party
Printed Name: _____
Address: _____
City: _____
State: _____
Zip: _____
Telephone Number: _____
Fax Number: _____
Email Address: _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in **all** blanks]

I, *{full legal name and trade name of nonlawyer}* _____,
a nonlawyer, located at *{street}* _____, *{city}* _____,
{state} _____, *{phone}* _____, *{zip}* _____, helped *{name}* _____,
who is the [check **one** only] petitioner **or** respondent, fill out this form.