AFFIDAVIT OF SERVICE BY MAIL

STATE OF MINNESOTA)
) ss.
COUNTY OF WINONA)

_____
(Business)

vs.

_____
(Defendant)

_____ of the City of Winona, County of Winona, in the State of
(Business Representative)

Minnesota, being duly sworn, says that on the _____ day of _____, 20_____,

(she) (he) served the annexed Notice and Demand for Payment of Dishonored Check on the

Defendant in this action, by mailing to (her) (him) a copy thereof, enclosed in an envelope,

postage prepaid, and by depositing same in the post office at Winona, Minnesota directed to

_____ at _____,
(Defendant) (Address)

the address printed on the check.

_____
(Signature of Business Representative)

Subscribed and sworn to before me this

_____ day of _____, 20_____.

_____
Notary Public