

**SALT LAKE CITY JUSTICE COURT**

333 SOUTH 200 EAST, PO BOX 145499, SALT LAKE CITY, UT 84111-5499

Phone: 801-535-6300 / Fax: 801-535-6302 / www.slcgov.com/courts/

Name \_\_\_\_\_ Plaintiff )

Street Address \_\_\_\_\_ )

City, State, ZIP \_\_\_\_\_ )

vs. \_\_\_\_\_ )

Name \_\_\_\_\_ Defendant )

Street Address \_\_\_\_\_ )

City, State, ZIP \_\_\_\_\_ )

**SMALL CLAIMS**

**CERTIFICATE OF**

**SERVICE**

Case No. \_\_\_\_\_

I certify that I served a copy of \_\_\_\_\_ (document name) on the following people.  
I declare under criminal penalty of Utah Code Section 78B-5-705 that this Certificate of Service is true and correct.

Business or Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age & discretion residing there.)		
<b>Salt Lake City Justice Court</b> (Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Date \_\_\_\_\_

Sign here ► \_\_\_\_\_

Typed or printed name \_\_\_\_\_