## FOR CLAIMS UNDER \$20,000 ONLY

## MAGISTRATES' COURT OF VICTORIA AT MELBOURNE INDUSTRIAL DIVISION

Deponent Signature

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Witness Signature

BETWEEN	
	Employee
Of: (address)	
AND	
Of: (address)	Employer
Small Claim - Affidavit of Service	
I	
(full name of the person serving document (occupation)	_
of	
(address)	
*make oath and say	
*declare that	()
I served (describe each document and whether it was a copy of a document or an original docu	ment)
on	
(name of the person/company served)	•
on the day of (Month) (Year) at	am/pm
(Day) (Date) (Month) (Year) (Til	me)
Service when the Employer is an Individual (Please select one of the following options)	
(Flease select one of the following options)	
*By leaving it with him/her personally at (address)	
*By delivering it to his/her place of residence at (address) to a person over the age of 16 years and residing there: (name)	
*Describe how you identified the person you served and established that the person was over the age of 16 years and a resident at the address?	

Service when the Employer is a Business (Please select one of the following options)				
*Delivering it to his/her place of business at (address) to a person over the age of 16 years and apparently in charge of that business or employed in the office of that business: (name of person documents left with)				
*Describe fully how you identified the address to be the place of business of the Defendant and how you identified the person served to be over the age of 16 years and apparently in charge of that office or employed by that business:				
*Posting it by post to (post office address)				
addressed to him/her at (address for service)				
Service when the Employer is a Company				
*Leaving it at / sending it by post to the registered office of the company (as lodged with ASIC) at  (address)				
I acknowledge that this declaration is true and correct and I make it in the belief that a person making a false declaration is liable to the penalties of perjury.  *Sworn/Declared at (place)				
in the State of Victoria on (date)				
(Signature of person making affidavit)  Before (Signature)				

\*authorised under section 107A(1) of the **Evidence (Miscellaneous Provisions) Act 1958** to witness the signing of a statutory declaration.

(Name and address in legible writing, typing or stamp)

<sup>\*</sup>authorised under section 123C(1) of the **Evidence (Miscellaneous Provisions) Act 1958** to take an affidavit.