**AFFIDAVIT/DECLARATION OF SERVICE OF FORM 46A SUMMONS**

IN THE MAGISTRATES’ COURT Court Number:

OF VICTORIA

AT

BETWEEN

Plaintiff

OF:

And

Defendant

OF

|  |  |  |  |
| --- | --- | --- | --- |
| Date of Document |       |  |  |
| Filed on behalf of: |       |  |  |
| Australian lawyer name: |       | Code: |       |
| Address: |       | Telephone: |       |
| Reference |       |

|  |  |  |  |
| --- | --- | --- | --- |
| I |       |  |       |
|  | *(full name of person serving document)* |  | *(occupation)* |
| of | *(address)* |       |
|  |  |
| make oath and say/declare that/affirm and say I served a true copy of the Summons on |
|       | by |
|  |  (*name of person served)* |
| **\*** | leaving it with \*him/her personally at |       |
|  |  |  | (*address)*   |
|  |  |
| **\*** | delivering it to \*his/her place of residence to |  |
|  | *(name of person given document)* |       |
|  | a person apparently above the age of 16 years and residing there at |
|  | *(address)* |       |
|  |  |
| **\*** | delivering it to \*his/her place of business at |  |
|  | *(address)* |       |
|  | to | *(Name of person given document*) |       |
|  | a person apparently above the age of 16 years and apparently in charge of that business or employed in the office of that business. |
|  |  |  |  |
| **\*** | Posting it by prepaid ordinary post at *(address)* |       |
|  | addressed to \*him/her at \*his/her address for service at |
|  |       |
|  |  |  |  |
| **\*** | Leaving it at/\*sending it by post to the registered office of the corporation at |
|  | *(address of registered office)* |       |
|  |
| **on** |  | **the** |  | **day of** |  | **,** |  | **at** |  | **a.m/p.m.** |
|  | *(Day)* |  | *(Date)* |  | *(Month)* |  | *(Year)* |  | *(Time)* |  |

***\**** *Delete if not applicable*

\*[*for affidavits*] The contents of this affidavit are true and correct and I make it knowing that a person making a false affidavit may be prosecuted for the offence of perjury.

\*[*for statutory declarations*] I declare that the contents of this statutory declaration are true and correct and I make it knowing that making a statutory declaration that I know to be untrue is an offence.

\*SWORN/ DECLARED/ AFFIRMED AT

in the State of Victoria on

 *(date)*

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Signature of person making affidavit:*

Before me: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\*authorised under section 19(1) of the **Oaths and Affirmations Act 2018 to** take an affidavit.

\*authorised under section 30(2) of the **Oaths and Affirmations Act 2018** to witness the signing of a statutory declaration.

***\**** *Delete if not applicable*