

**This is a private record**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

I am the  Petitioner  
 Respondent  
 Attorney for the  Petitioner  Respondent and my Utah Bar number is \_\_\_\_\_

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

_____	<b>Affidavit in Support of Exhibit</b> (Commissioner cases only, URCP 101)
Petitioner	_____
v.	Case Number
_____	_____
Respondent	Judge
	_____
	Commissioner

\_\_\_\_\_ (name), being duly sworn and under oath says as follows:

- (1) I am the  Petitioner  Respondent  Other \_\_\_\_\_  
(identify)
- (2) I am submitting the following exhibit in support of my  
 Motion to \_\_\_\_\_  
 Memorandum Opposing Motion to \_\_\_\_\_

Reply to Memorandum Opposing Motion to \_\_\_\_\_

Other \_\_\_\_\_

(Describe item submitted and what it proves. For example, 2014 federal tax return; August 1999 bank statement):

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(3) This exhibit is authentic because (Describe how you came to have this exhibit, or what you know about this exhibit that proves it is authentic):

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I have not included any non-public information in this document.

\_\_\_\_\_ Sign here ► \_\_\_\_\_

Date \_\_\_\_\_ Typed or Printed Name \_\_\_\_\_

I certify that \_\_\_\_\_, who is known to me or who presented satisfactory identification, has, while in my presence and while under oath or affirmation, voluntarily signed this document and declared that it is true.

\_\_\_\_\_ Sign here ► \_\_\_\_\_

Date \_\_\_\_\_ Typed or printed name (Court Clerk or Notary Public) \_\_\_\_\_

Notary Seal

### Certificate of Service

I certify that I served a copy of this document on the following people.

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 and discretion residing there.)		
(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.)		

\_\_\_\_\_ Sign here ► \_\_\_\_\_  
 Date  
 \_\_\_\_\_  
 Typed or Printed Name \_\_\_\_\_