

CERTIFICATE OF SERVICE¹

I certify that on *(date)* _____, I *(check one)*

mailed | emailed

a copy of this document to:

1) Party Name: _____

Attorney Name: *(if any)* _____

Address: _____

Email address: _____

2) Party Name: _____

Attorney Name: *(if any)* _____

Address: _____

Email address: _____

Respectfully submitted,

[Signature]

[Date]

NAME OF PARTY OR ATTORNEY
EMAIL ADDRESS
LAW FIRM NAME (IF APPLICABLE)
MAILING ADDRESS
TELEPHONE NUMBER
BAR NUMBER (IF APPLICABLE)

¹ Any document filed with the Court of Appeals must also be sent to the opposing party. This form certifies that a copy has been provided. Rule 5A:1(c).