

**SAGINAW CHIPPEWA TRIBAL COURT  
CIVIL DIVISION**

**MOTION AND VERIFICATION  
FOR ALTERNATE SERVICE**

**CASE NO.**

**Court address**  
6954 E. BROADWAY, MT. PLEASANT, MI 48858

**Court telephone no.**  
989-775-4800

Plaintiff name(s), address(es), and telephone number(s)

Defendant name(s), address(es), and telephone number(s)

**v**

1. Service of process upon \_\_\_\_\_ cannot reasonably be made as shown in the following verification of process server.
2. Defendant's last known home and business addresses are:

Home address	City	MI	48858
		State	Zip

Business address	City	State	Zip
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a. I believe the  home  business address shown above is current.

b. I do not know defendant's current  home  business address. I have made the following efforts to ascertain the current address: \_\_\_\_\_

3. I request the court order service by alternate means.

I declare that the statements above are true to the best of my information, knowledge and belief.

_____ Date	_____ Attorney signature
_____ Address	_____ Attorney name (type or print) Bar no.
_____ City, state, zip	_____ Telephone no.

**VERIFICATION OF PROCESS SERVER**

1. I have tried to serve process on this defendant as described: \_\_\_\_\_ State date, place and what occurred on each occasion

I declare that the statements above are true to the best of my information, knowledge and belief.

_____ Date	_____ Signature
	_____ Process Server (type or print)