### STATE OF SOUTH DAKOTA

### IN CIRCUIT COURT

COUNTY OF	

JUDICIAL CIRCUIT

Plaintiff	FILE NO:
VS	NOTICE AND ADMISSION OF SERVICE OF SUMMONS & COMPLAINT (PATERNITY
Defendant	ACTION)

### TO THE ABOVE-NAMED DEFENDANT:

The enclosed Summons (Paternity Action), South Dakota Parenting Guidelines, and Complaint (Paternity Action) are sent to you pursuant to SDCL 15-6-4(i), as well as two (2) copies of this Notice and Admission of Service of Summons (Paternity Action) and Complaint (Paternity Action), and <u>a</u> return envelope, postage prepaid, addressed to the Plaintiff.

You must complete the Admission of Service portion of this form and return the original to the sender within 20 days. In completing the form, you must fill in the town and state where you received the papers and sign and date the document. Failure to sign and return the original Admission of Service within 20 days after the date of mailing without good cause will result in the Court ordering the person so served to pay the costs of personal service. SDCL 15-6-4(i).

After you complete and return this form, you must then answer (respond to) the Complaint within 30 more days. If you fail to answer in time, judgment may be entered against you by default as requested in the Complaint.

I hereby certify that this Notice and Admission of service was mailed, postage prepaid, on this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_\_, to the above-named Defendant,

\_\_\_\_\_, at the following mailing address:

FORM UJS-183 REV. 07/2022

from		(city where documents were mailed from)
	County,	(state where
documents were mailed from).		
Date this	_ day of	, 20
		Plaintiff's Signature
		Typed or Printed Name
		Mailing Address
		City, State and Zip Code
		Telephone Number

# ADMISSION OF SERVICE OF SUMMONS & COMPLAINT (PATERNITY ACTION)

I, \_\_\_\_\_\_ (insert the name of the Defendant), admit receiving copies of the Summons (Paternity Action), South Dakota Parenting Guidelines, the Complaint (Paternity Action), and the Notice and Admission of Service of Summons & Complaint in the above-captioned matter at (*insert the city, county and state where you were when you received the document*):

 _(city)
 _(county)
 _(state).

This Admission merely acknowledges receipt of the papers; I do not admit or deny any of the statements contained in those papers.

Dated this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_\_.

Signature of Defendant

Typed or Printed Name

Mailing address

City, State and Zip Code

Telephone Number

FORM UJS-183A REV. 07/2022

## **AFFIDAVIT OF MAILING**

I, \_\_\_\_\_\_, being sworn, state that on *(Full legal name of Plaintiff)*, 20\_\_\_\_\_, I sent the following documents:

- SUMMONS (PATERNITY ACTION);
- SOUTH DAKOTA PARENTING GUIDELINES;
- COMPLAINT (PATERNITY ACTION); &
- NOTICE & ADMISSION OF SERVICE OF SUMMONS & COMPLAINT (PATERNITY ACTION)

by placing true and correct copies in an envelope addressed to:

	at
Full legal name of Defendant	Defendant's mailing address
n the City of	, State of
Zip Code and depositing the env	velope, with sufficient postage, in the United States
Mail at	
Mail at( <i>city and state mailed from</i> )	
Dated this day of	, 20
	Plaintiff's Signature (Date and sign in front of Notary Public/Clerk)
Sworn/affirmed before me this day of	Print Plaintiff's Name
, 20	Mailing Address
Notary Public/Clerk of Court	
If Notary, my commission expires:	City/State/Zip
(SEAL)	Phone No.

FORM UJS-183B REV. 07/2022