

STATE OF INDIANA
COUNTY OF WAYNE

IN THE WAYNE SUPERIOR COURT NO. 3
CAUSE NO. 89D03-_____

vs. _____

Plaintiff(s) Defendant(s)

AFFIDAVIT OF DESIGNATED FULL-TIME EMPLOYEE

1. Name of Party: _____
2. Name of Designated Full-Time Employee: _____
Address: _____
Telephone No.: _____
E-mail address: _____
3. I am a **FULL-TIME** employee of _____
4. I affirm under the penalties of perjury that I am not a lawyer who has been disbarred or suspended from the practice of law in any jurisdiction.
5. **A copy of the Certificate of Compliance is attached.**

Date: _____

Signature of Designated Full-Time Employee

CERTIFICATE OF SERVICE

I hereby certify that I have delivered a copy of this Affidavit to the opposing party/parties listed below by: hand-delivery or by depositing the document in the U.S. Postal Service, first-class postage prepaid, on or before the date of filing.

Opposing Party (1)'s name and address: _____

Opposing Party (2)'s name and address: _____

Signature