

STATE OF NORTH CAROLINA

File No.

In The General Court Of Justice
District Court Division

_____ County

IN THE MATTER OF

Name And Address Of Respondent

Name And Address Of Petitioner

**CERTIFICATE OF SERVICE
(Adult Protective Services)**

G.S. 108A-104, -105, -106

I, the undersigned, certify that I served on each of the named persons below a copy of the order _____ and filed on (date) _____ in the above-captioned case, pursuant to Rule 5 of the Rules of Civil Procedure.

<i>Name Of Respondent</i>	<i>Method Of Service</i>
<i>Name Of Guardian Ad Litem</i>	<i>Method Of Service</i>
<i>Name Of Respondent's Attorney</i>	<i>Method Of Service</i>
<i>Name Of Respondent's Guardian</i>	<i>Method Of Service</i>
<i>Name Of Respondent's Spouse</i>	<i>Method Of Service</i>
<i>Name Of Adult Child Or Next Of Kin (only required if respondent has no spouse)</i>	<i>Method Of Service</i>
<i>Name Of Adult Child Or Next Of Kin (only required if respondent has no spouse)</i>	<i>Method Of Service</i>
<i>Name Of Adult Child Or Next Of Kin (only required if respondent has no spouse)</i>	<i>Method Of Service</i>
<i>Name Of Adult Child Or Next Of Kin (only required if respondent has no spouse)</i>	<i>Method Of Service</i>
<i>Other (specify)</i>	<i>Method Of Service</i>

<i>Date</i>	<i>Name Of Petitioner (type or print)</i>	<i>Signature Of Petitioner</i>
-------------	---	--------------------------------