

**THE STATE OF NEW HAMPSHIRE**  
**JUDICIAL BRANCH**  
<http://www.courts.state.nh.us>

Court Name: \_\_\_\_\_

Case Name: \_\_\_\_\_

Case Number: \_\_\_\_\_  
(if known)

**AFFIDAVIT AS TO MILITARY SERVICE**

I (WE) \_\_\_\_\_  
[enter names of petitioner]

of \_\_\_\_\_  
[enter address]

state the following facts showing that, to the best of my (our) knowledge and belief:

1) The respondent(s)/defendant(s) \_\_\_\_\_

is (are) **not** in the military or other service of the United States included in the provisions of the Servicemembers Civil Relief Act (SCRA) and has (have) not been called by the governor to active duty for a period of 30 days or more as a member of the state guard or national guard or as a member of the militia within the meaning of RSA 110-C:2.

(Please state supporting facts, i.e., where respondent(s)/defendant(s) is (are) living, employed, or approximate age sufficient to show not in military service).

\_\_\_\_\_  
\_\_\_\_\_

2) The respondent(s)/defendant(s) \_\_\_\_\_

**is** (are) in the military or other service of the United States included in the provisions of the Servicemembers Civil Relief Act (SCRA) or has (have) been called by the governor to active duty for a period of 30 days or more as member of the state guard or national guard or as a member of the militia within the meaning of RSA 110-C:2.

(Please state the name of the branch service and the respondent/defendant's address).

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Petitioner / Plaintiff

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Petitioner / Plaintiff

State of \_\_\_\_\_, County of \_\_\_\_\_

This instrument was acknowledged before me on \_\_\_\_\_ by \_\_\_\_\_  
Date Name of Petitioner/Plaintiff

My Commission Expires \_\_\_\_\_  
Affix Seal, if any

\_\_\_\_\_  
Signature of Notarial Officer / Title