AFFT
(Your Name) _____
(Address)_____
_____
(Telephone) _____
(Email Address)_____
In Proper Person

**DISTRICT COURT**

**CLARK COUNTY, NEVADA**

| | |
|---|---|
| _____<br>Plaintiff,<br>vs.<br>_____<br>Defendant. | CASE NO.: _____<br><br>DEPT NO.: _____<br>**AFFIDAVIT OF DUE DILIGENCE** |

STATE OF NEVADA )
) ss:
COUNTY OF CLARK )

I, (your name) _____,do solemnly swear to testify herein to the truth, the whole truth and nothing but the truth.

That to the best of Affiant's knowledge the Defendant was last known to reside in the State of _____ at the following address _____ and that the Defendant was last known to reside there on (date)_____.

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## Businesses Contacted

| Did you contact this business? (Circle One) | Name of Business | Date Contacted? |
|---|---|---|
| **Yes** **No** | Dept. of Motor Vehicles | _____ ___, 20__ |
| **Yes** **No** | Voter's Registration | _____ ___, 20__ |
| **Yes** **No** | Utility Companies | _____ ___, 20__ |
| **Yes** **No** | Tax Assessor's Office | _____ ___, 20__ |
| **Yes** **No** | County Recorder's Office | _____ ___, 20__ |
| **Yes** **No** | Online Search Engines (i.e. Google or Yahoo) | _____ ___, 20__ |
| **Yes** **No** | Social Networking Websites (i.e. Facebook or Myspace) | _____ ___, 20__ |
| **Yes** **No** | Free Internet People Searches | _____ ___, 20__ |
| **Yes** **No** | Online and Reverse Directories | _____ ___, 20__ |
| **Yes** **No** | Social Security Death Index | _____ ___, 20__ |
| **Yes** **No** | U.S. Postal office by sending an envelope with the words "address correction requested/do not forward" printed on the front to the Defendant's last known address which was returned to me on (date) _____with the following address for Defendant _____ _____ | _____ ___, 20__ |
| **Yes** **No** | Defendant's current employer. The employer informed me that: _____ _____ _____ | _____ ___, 20__ |
| **Yes** **No** | Defendant's last employer. The employer informed me that _____ _____ _____ | _____ ___, 20__ |
| **Yes** **No** | Other: _____ _____ | _____ ___, 20__ |
| **Yes** **No** | Other: _____ _____ | _____ ___, 20__ |


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## People Contacted

| Did you contact these people? (Circle One) | Name of Person(s) | Date contacted? |
|---|---|---|
| **Yes** **No** | Defendant's family and/or friends (names of family and/or friends contacted) _____ _____ They informed me that _____ _____ _____ . | _____ ___, 20__ |
| **Yes** **No** | Neighbors at Defendant's last known address (names of neighbors contacted) _____. They informed me that _____ _____ _____. | _____ ___, 20__ |
| **Yes** **No** | The person currently living at the Defendant's last known address (name) _____. They informed me that _____ _____ _____. | _____ ___, 20__ |
| **Yes** **No** | Other _____ _____ | _____ ___, 20__ |
| **Yes** **No** | Other _____ _____ | _____ ___, 20__ |



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That after conducting the above search Affiant was unable to locate Defendant. Therefore, Affiant believes that Defendant cannot be found at this time. FURTHER THE AFFIANT SAYETH NAUGHT.

Dated this (day)____ day of (month)_____, (year)_____.

(Affiant's signature) _____

(Affiant's printed name) _____

SUBSCRIBED and SWORN to before
me this _____ day of
(month)_____, (year)_____.

_____
NOTARY PUBLIC



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