

STATE OF NORTH CAROLINA COUNTY OF _____	<i>File No.</i>
IN THE GENERAL COURT OF JUSTICE <input type="checkbox"/> Superior <input type="checkbox"/> District <input type="checkbox"/> Before the Clerk <input type="checkbox"/> Small Claims	
Plaintiff	<b>Affidavit of Attorney Appointed Under          Servicemembers Civil Relief Act          50 U.S.C. App. §§521</b>
vs.	
Defendant	

NAME OF APPOINTED ATTORNEY

NAME OF DEFENDANT/SERVICEMEMBER

MILITARY STATUS OF DEFENDANT/SERVICEMEMBER

**AFFIDAVIT**

I, the above named attorney, appointed under the Servicemembers Civil Relief Act, 50 U.S.C. App. §§521 to represent the above named defendant/servicemember in the limited capacity described in the said Act, say on oath or affirm under penalty of perjury that the following statements are true and correct to the best of my knowledge and belief:

1.     **I WAS**     **I WAS NOT** able to determine the defendant/servicemember's military status. Details of that status are listed above.
  
2.     **I DID contact the defendant/servicemember and verified that he/she has actual notice of the lawsuit.** The servicemember's current mailing address and telephone number are:
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_
  
- I DID NOT contact the service member.** The following efforts were made to locate the servicemember:
   
\_\_\_\_\_
   
\_\_\_\_\_
   
\_\_\_\_\_
  
3.     I advised the servicemember of the protections of the Servicemembers Civil Relief Act.
  
4.     I advised the servicemember of the possibility of entry of default judgment and of the consequences of such a judgment.

5.  I ascertained that the servicemember's ability to appear  
 **IS AFFECTED**     **IS NOT AFFECTED** in any way by his/her military status.
6.  Based on the defendant's military status and its effect on his/her ability to appear, I have ascertained that the servicemember  
 **DOES**     **DOES NOT** wish to move for a 90 day stay of the proceedings to enable him/her to obtain counsel or prepare  
a defense on the merits of the case.
7.  I have advised the defendant of the next scheduled court date and his/her responsibility to appear.  
The **Court Date** I provided is \_\_\_\_\_ **Time** \_\_\_\_\_ **Courtroom** \_\_\_\_\_.  
 **There is no currently scheduled court date for me to provide to the defendant.**
8. My duties as required in the Attorney Appointment Order in this case are now completed. The servicemember should henceforth  
be served at:     **The servicemember's current address above.**                       **The servicemember's last known address.**
9. Based on the information I have, I make the following additional recommendation(s):  
\_\_\_\_\_  
\_\_\_\_\_
10. I understand that my appointment is limited to those duties addressed herein. I further understand that this appointment does not  
extend to preparation of a defense on the merits of the lawsuit and that as of the date of filing of this Affidavit my withdrawal is  
allowed.

**DATE/SIGNATURE**

**Date:** \_\_\_\_\_ **Signature of Appointed Attorney:** \_\_\_\_\_

**Print or Type Name of Appointed Attorney** \_\_\_\_\_

**NOTARY**

**Subscribed and sworn to or affirmed before me in** \_\_\_\_\_ **County, North Carolina.**

**Date:** \_\_\_\_\_ **My commission expires:** \_\_\_\_\_

**Signature of Notary:** \_\_\_\_\_ **(SEAL)**

**Print or Type Name of Notary:** \_\_\_\_\_

**Distribution by Appointed Attorney**

**Original-Court File**

**Copy to Plaintiff or Plaintiff's Attorney**