

**Form 10. Certificate of service.**

Attorney Name  
Address  
Phone Number  
Bar Number

[ALTERNATIVE 1: ACKNOWLEDGMENT OF RECEIPT.] I, (name) , acknowledge receipt of service of the attached (document) .

Date: \_\_\_\_\_ (signature)

Name

Address

[ALTERNATIVE 2: PERSONAL SERVICE.] I, (name) , certify that on (date) I served a copy of the attached (document) upon (name) , the [counsel for the] [appellant] [appellee] in this matter, by personally hand delivering it to [him] [her] at the following address:

(signature)

Attorney of Record

[ALTERNATIVE 3: SERVICE BY MAIL.] I, (name) , certify that on (date) I served a copy of the attached (document) upon (name) , the [counsel for the] [appellant] [appellee] in this matter, by mailing it to [him] [her] by first class mail with sufficient postage prepaid to the following address:

(signature)

Attorney of Record

References

Utah R. App. P. 3(e); 14(c); 21(b); 21(c); 21(d); 40(a)