File	er's N	Name	
Ado	dress		-
		nte, Zip	
Telephone NumberEmail:			
	uii. ₋		Chancery Division – Family Part County of
		Plaintiff	Docket Number
vs.			Case ID
			Civil Action
		Defendant	Certification of Non-Military Service
I, _		, hereby certify th	nat:
1.	I an	n the (check one) plaintiff defendant	in the above-entitled civil action.
2.	I an	I am personally acquainted with the other party and know that he or she resides at:	
	Oth		
3.	The other party is not in the Military Service of the United States.		
4.		I am supplying the Court with the following information as to how I know the other party is not in the	
4.	military. (Check all statements below that apply to your case) In each case you must explain how any conta		
	proves that the other party is not in the military):		
	☐ I have recently seen the other party (when, where, circumstances):		
	П	My child(ren) last had parenting time with him or her on (when, where, circumstances):	
		at	
		☐ I have recently had telephone contact with the other party.	
		I know where the other party works (indicate employer name and address):	
	1 know where the other party works (indicate employer name and address):		
		To my knowledge, the other party's age exceeds the military requirements (state age)	
		The other party is disabled (indicate nature of disability):	
	Ш	The other party is incarcerated (indicate location):	
		Any other reason: and/or	
		I have checked with the Department of Defense (https://scra.dmdc.osd.mil/) OR	website and the printout is attached.
		I have attached statements from the 5 armed for	ces that the other party is not in the military service.
		that the foregoing statements made by me are try me are willfully false, I am subject to punishme	rue. I am aware that if any of the foregoing statements ent.
Dat	ed	Plaintiff / Defe	endant