

**AFFIDAVIT OF SERVICE PETITION FOR ORDER
RE: COMMISSION ON HUMAN RIGHTS AND
OPPORTUNITIES AND NOTICE OF HEARING**

JD-CV-69 Rev. 12-23
C.G.S. § 46a-82e(d)

STATE OF CONNECTICUT
JUDICIAL BRANCH
SUPERIOR COURT
www.jud.ct.gov



Instructions to Petitioner

Complete the Affidavit (the Docket Number is the number assigned by the clerk to your original petition), attach your return receipts and file the Affidavit with the clerk of court no later than five days after service was made.

For information on ADA accommodations, contact the Centralized ADA Office at 860-706-5310 or go to: www.jud.ct.gov/ADA/

AFFIDAVIT OF SERVICE

PETITION FOR ORDER RE: COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES AND NOTICE OF HEARING

**TO: Superior Court for the Judicial District of Hartford,
95 Washington Street, Hartford, CT 06106**

Docket number _____

Name of petitioner	Address of petitioner (Number, street, town, zip code)
Name of respondent COMMISSION ON HUMAN RIGHTS & OPPORTUNITIES	Address of respondent (Number, street, town, zip code) 450 COLUMBUS BOULEVARD, HARTFORD, CT 06103
CHRO Case name	CHRO Case number

Affidavit of Service

I, the undersigned Petitioner in the above referenced Petition for Order RE: Commission on Human Rights and Opportunities and Notice of Hearing, certify that a copy of the Petition and Notice of Hearing in the above referenced matter was served on the date and in the manner noted below for each of the defendants, and that I have attached the return receipts that I have received indicating the delivery of the Petition and Notice of Hearing:

	Name of Respondent	Method of Service Certified/Registered	Date of Service	Return Receipt Number
1.				
2.				
3.				
4.				

(If additional Respondents were served, complete a second affidavit)

Dated at _____, Connecticut on _____
Insert town where signed *Insert date you sign the affidavit of service*

SIGNED _____
Petitioner/Attorney

Subscribed and sworn to before me at _____ this _____ day of _____, _____.

Commissioner of the Superior Court/Notary Public

My Commission Expires _____