

FORM 8B.

AFFIDAVIT OF DEFAULT OF MAINTENANCE JUDGMENT

STATE OF MINNESOTA
COUNTY OF _____

_____, being duly sworn on oath deposes and states that s/he is the _____.

According to the order dated _____, the obligor is to pay \$_____ per _____ as and for spousal maintenance. Obligor is more than thirty days in arrears. For the period _____, 20__ through _____, 20__, payments due amounted to \$_____, the amount paid was \$_____, and the total amount unpaid is \$_____.

The obligor's full name is _____. The obligor's last known employer is _____. The obligor's last known address is _____, in the City of _____, State of _____. The obligor's last known post office address is _____, _____. The obligor is not in the Armed Services.

All maintenance payments are payable to _____.

Subscribed and sworn to before me
this _____ day of _____, 20__.

Notary Public