

USE THIS AFFIDAVIT OF MAILING FORMAT TO DOCUMENT THE MAILING OF
"LEGAL NOTICE FORMS" TO PARENTS.

AFFIDAVIT OF MAILING

STATE OF WISCONSIN

WAUKESHA COUNTY

(Individual's name), a secretary (or other position), at (school name) on the
() day of (), 2012, deposited, postpaid in a U.S. Mail Depository at (location)
envelopes addressed to:

1. Name and address
 - 2.
 - 3.
 - 4.
- etc.

The above addresses are believed to be the last known addresses of these individuals.
The envelopes contain copies of the State of Wisconsin Legal Notice Forms informing
each individual that their child has not complied with the immunization requirements by
the established deadline and this matter has been turned over to the District Attorney
for legal action.

(signature)

Subscribed and sworn to before me this
_____ day of _____, 2012.

Notary Public, State of Wisconsin
My commission expires: