

Acceptance of Service

Service Form 3a

Acceptance of Service

The numbers on these instructions correspond with the numbers in the boxes on the form. Use the form with the boxes to guide you through filling out the blank form.

Box 1: Print the name of the county in which you filed.

Box 2: Print the name of the plaintiff exactly as it appears on the Complaint.

Box 3: Print the docket number that the office where legal pleadings are filed wrote on Complaint at the time of filing.

Box 4: Print the name of the defendant exactly as it appears on the Complaint.

THE DEFENDANT MUST COMPLETE THE FORM.

File this form in the office where legal pleadings are filed.

IN THE COURT OF COMMON PLEAS OF 1 COUNTY, PENNSYLVANIA
 CIVIL ACTION

2
 Plaintiff _____

4 vs.
 Defendant _____

Case No. 3 _____

ACCEPTANCE OF SERVICE

I accept service of the:

 Divorce: Divorce Complaint, Notice to Defend and Claim Rights, and
 Notice of Availability of Counseling

 Custody: Custody Complaint, Notice to Defend, and Criminal Record / Abuse
 History Verification

Date: _____

 Defendant's Signature

IN THE COURT OF COMMON PLEAS OF _____ COUNTY, PENNSYLVANIA
CIVIL ACTION

Plaintiff
:
:
:
vs. No. _____
:
:
:

Defendant
:

ACCEPTANCE OF SERVICE

I accept service of the:

___ **Divorce:** Divorce Complaint, Notice to Defend and Claim Rights, and
Notice of Availability of Counseling

___ **Custody:** Custody Complaint, Notice to Defend, and Criminal Record / Abuse
History Verification

Date: _____

Defendant's Signature