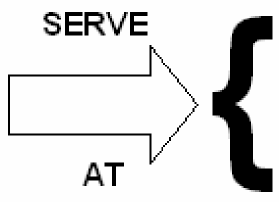


Instructions: Fill in the boxes (hint:use Adobe's highlight fields option to see them more clearly) relevant to your Process Serving Requirement and either PRINT and FAX to 215-359-1635 or; E-Mail to Info@PaLawServe.com. Remember to include the documents to be served in your Fax or E-Mail!

AFFIDAVIT OF SERVICE

LawServe, 1901 Walnut St, 2E, Phila Pa 19103, Toll Free: 800-796-4147 - Fax: 215-359-1635

PLAINTIFF/S/		COURT NAME	COURT #
DEFENDANT/S/		DOCUMENT TO BE SERVED	
	INDIVIDUAL, COMPANY, CORPORATION, ETC., TO BE SERVED:		
	Name: Address: City, State, Zip: Phone (if available):		
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE:			
ATTORNEY FOR PLAINTIFF		Phone:	INTERNAL CASE #
Name:		Fax:	
Firm:			
Address:			
City, State, Zip:			

_____, hereby certifies in accordance with law that he did serve upon above named Defendant a true and correct copy of the above-captioned on the _____ day of _____ 20__ at ____ o'clock ____ .M., in the following manner:

- () Defendant(s) personally served.
- () Adult family member with whom said Defendant(s) reside(s);
Name/Relationship is _____
- () Adult in charge of Defendant's residence;
Name/Relationship is _____
- () Manager / Clerk of place of lodging in which Defendant(s) reside(s).
- () Agent or person in charge of Defendant's office of usual place of business.
- () _____ an officer of said Defendant company.
- () POSTED in accordance with Court Order.

On the _____ day of _____, 20__, at ____ o'clock, ____ .M., Defendant not found because:

- () Moved () Unknown () Vacant () Other _____

I certify the foregoing to be true and correct.

SWORN TO AND SUBSCRIBED:

Before me this _____ day:
of _____, 2010:

SIGNATURE

PRINT NAME

Notary Public