## IN THE COURT OF COMMON PLEAS FOR ADAMS COUNTY, PENNSYLVANIA CIVIL ACTION - LAW

| Name  | PLAINTIFF  | :<br>:                                       |   |                          |                                |
|---|--|--|---|--------------------------|--------------------------------|
| vs.   |  | : CASE NO                                    |   |                          |                                |
|   |  | : ACT  | ION IN CUS                                    | TODY                     | •                              |
| Name  | DEFENDANT 1  | :  |   |                          |                                |
| and   | d (if applicable)  | :<br>:                                       |   |                          |                                |
|   | ,  | :  |   |                          |                                |
| Name  | DEFENDANT 2  | :<br>:                                       |   |                          |                                |
|   |  | VIT OF SERV<br>THIRD PARTY                   |   |                          |                                |
| Modification<br>Verification,<br>Record / Abu | ify that I served a copy of the job that I served a copy of th | d <u>Petitioner's C</u><br>with the Court, a | <u>Criminal Reco</u><br>and a blank <u>Re</u> | <u>rd / Ab</u><br>espond | ouse History<br>ent's Criminal |
| Name of p                                     | onon   | Date   | , at  | Time                     | □ a.m./ □ p.m.)                |
| at  | Street Address   | City   |   | State                    | - Zin Code                     |
| years and I am<br>I veri<br>understand th     | opies thereof to Respondent. I<br>m not a party to the Proceeding<br>fy that the statements made in<br>hat false statements herein are<br>4904 relating to unsworn falsi   | g.<br>the foregoing of<br>made subject to    | locument are to the penalties                 | true an                  | d correct. I                   |
| Date:   |  | Signature of person                          | certifying service                            |                          |                                |
|   |  | Name of person cer                           | tifying service (print                        | ed or type               | d)                             |
|   |  | Street Address of pe                         | erson certifying servi                        | ice                      |                                |
|   |  | City   |   | State                    | Zip Code                       |
|   |  | Area Code Telepi                             | hone Number of pers                           | son certify              | ring service                   |