Frm-Praecipe

IN THE COURT OF COMMON PLEAS OF SENECA COUNTY, OHIO

_____ Case No_____
Name

_____
Street Address

_____
City, State and Zip
***-**-_____
Social Security Number

_____ Judge_____
Date of Birth Plaintiff

vs.

_____
Name

_____
Street Address

_____ **PRAECIPE FOR SERVICE**
City, State and Zip
***-**-_____
Social Security Number

_____
Date of Birth Defendant

WARNING: YOU WILL NOT BE GIVEN A HEARING DATE UNLESS ALL FORMS ARE FILLED OUT COMPLETELY AND ALL ADDRESSES ARE FURNISHED.

To the Clerk of Courts: Please serve a copy of the _____ upon
[example: complaint for divorce/answer]
the following persons: [check the correct line]

_____ Plaintiff at the address listed above.
_____ Defendant at the address listed above.
_____ Legal custodian other than Plaintiff or Defendant.
Name of custodian_____
Address_____

by: [check the correct line] Note: these costs may be added to the court costs.

_____ certified mail
_____ personal service
_____other, please specify_____

_____
Your signature