DISTRICT COURT OF MARYLAND FOR _____

City/County

Located at _____ Case No._____

Court Address

_____ vs. _____
Plaintiff/Judgment Creditor   Defendant/Judgment Debtor

Trial Date _____ Issue Date _____ Expiration Date _____ Received From _____ County

REQUEST FOR SERVICE

Please serve the attached process on the person shown.

ORDER FOR SERVICE

You are hereby commanded to serve the attached process and to make your return promptly on this Order if served, and if you are unable to serve, you are to make your return on this Order and return the original process to the Court no later than ten days following the termination of the validity of the process.

_____   _____
Date   Clerk

Case No. _____

Type of Paper _____

If service is not effected, send refund to:

_____

_____

_____

PROOF OF SERVICE

I CERTIFY

☐ that I served a Summons by ☐ restricted delivery mail, return card attached

☐ delivery to _____
Name

_____ on _____
Title   Date   Time

Description of Defendant: Race_____ Sex_____ Ht._____
Wt._____ Age_____ Other_____

☐ and left with him a copy of the Complaint and all supporting papers.

☐ I posted the premises at _____

☐ I was unable to serve because _____

_____

☐ I served the Writ of Garnishment on Wages on the Garnishee by ☐ restricted delivery mail, return card attached ☐ delivery to _____

☐ I served the Writ of Garnishment on Property on the Garnishee by ☐ restricted delivery mail , return card attached ☐ delivery to _____

and promptly after service mailed a copy of the Writ to the Judgment Debtor's last known address.

☐ I served an Order to Appear for Oral Examination in Aid of Enforcement by ☐ restricted delivery mail , return card attached ☐ delivery to _____

☐ I served a Show Cause Order by ☐ restricted delivery mail , return card attached ☐ delivery to _____

☐ Private Process Service Fee $ _____

If return is made by an individual other than a sheriff or constable , I solemnly affirm under the penalties of perjury that the contents of the foregoing paper are true to the best of my knowledge , information and belief and do further affirm I am a competent person over 18 years of age and not a party to the case.

_____   _____ _____
Date   Signature   Title

_____   _____
Time   Address if Private Process Server

                       _____
                       Telephone Number if Private Process Server

Plaintiff_____

Plaintiff's Attorney _____

Address_____

City , State , Zip _____

Defendant_____

Address_____

City , State , Zip _____

Serve in_____ County.

DC/CV 2 (Rev. 10/92)

☐ Serve on

Garnishee/Agent _____
Address _____
City , State , Zip _____
Serve in_____ County
Special Instructions_____
_____
_____

☐ Serve on

ATTEMPT	
1	_____
	Date/Time
2	_____
	Date/Time
3	_____
	Date/Time
4	_____
	Date/Time

COURT COPY