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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Deliver To:**  Name | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Defendant: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| City: | | | |  | | | | | | | State: | |  | | Zip: | | | | |  | | Phone: | | | |  | | |
|  | | | |  | | | | | | |  | |  | |  | | | | |  | |  | | | |  | | |
| **Client:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Client Name: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **Caption:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | Cause #: | | |  | | | | | | | | |  | | | | | | | | |
| In the Matter of the Marriage of: | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| In the Interest of: | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| 🞏 | | District Court | | | 🞏 | | County Court | | | | 🞏 | Probate Court | | | 🞏 | | Civil Court | | | | | 🞏 | Justice Court | | | | | |
| Courtroom #/County Court at Law #: | | | | | | | |  | | | | | | | County: | | | | |  | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Document(s):** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞏 | | | Citation with Petition *(name)* | | | | |  | | | | | | | | | | | | | | | | | | | | |
| 🞏 | | | Precept | |  | | | 🞏 | | Order Setting Hearing | | | | |  | | | | | 🞏 | Subpoena | | | | | | | |
| 🞏 | | | TRO | |  | | | 🞏 | | Protective Order | | | | |  | | | | | 🞏 |  | | | | | | | |
| 🞏 | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Additional Docs Attached: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
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| **Came to Hand:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date Received: | | | | |  | | | | | | Time Received: | | | |  | | | | | | | 🞏 | AM | | | 🞏 | PM |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Attempt Details:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Details: | | | | | | | | | | | | | | | | Location: | | | | | | | | | | | | |
| 1. |  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |
| 2. |  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |
| 3. |  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |
| 4. |  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |
| 5. |  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |
| 6. |  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |
| 7. |  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |
| 8. |  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |
| 9. |  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |
| 10. |  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | |  | |  | | | | | | | | | | | | | |
| **Delivered:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞏 | | | Residence | |  | | | 🞏 | Employment | | | |  | | 🞏 | | Other: | | | | |  | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| City: | | | |  | | | | | | | State: | |  | | Zip: | | | | |  | | County: | | | |  | | |
| Date: | | | |  | | | | Time: | | |  | | 🞏 | AM | 🞏 | | PM | | |  | | BY: | |  | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Charges:** | | | | | | | | | | | | | | | | | | **Invoicing:** | | | | | | | | | | |
|  | | | | | AMOUNT | | |  | | | | | Amount | | | | |  |  |  | | | | | | | | | |
| 🞏 | Citation | | | |  | | | 🞏 | Rush (add $25.00) | | | |  | | | | |  |  | Total Invoice | | | | |  |  | | | |
| 🞏 | Precept | | | |  | | | 🞏 | Mileage ($.50 per mile RT) | | | |  | | | | |  |  | Invoice # | | | | |  |  | | | |
| 🞏 | TRO | | | |  | | | 🞏 | Address Change | | | |  | | | | |  |  | Invoice Date | | | | |  |  | | | |
| 🞏 | Protective Order | | | |  | | | 🞏 | Witness Location | | | |  | | | | |  |  |  | | | | |  |  | | | |
| 🞏 | Subpoena | | | |  | | | 🞏 | Notary Fee | | | |  | | | | |  |  | Date Paid | | | | |  |  | | | |
| 🞏 | Witness Fee | | | |  | | | 🞏 | Surveillance | | | |  | | | | |  |  | Check # | | | | |  |  | | | |
| 🞏 | Affidavit | | | |  | | | 🞏 | Other: | | | |  | | | | |  |  | Amount Paid | | | | |  |  | | | |
|  |  | | | |  | | |  |  | | | |  | | | | |  | |  | | | | | | | | |