

.....
.....
Plaintiff

VS

CAUSE NO.

.....
.....
Defendant

*Original for Clerk and copy for each defendant to be prepared by attorneys.

SUMMONS

The State of Indiana to Defendant

You have been sued by the person (s) named "plaintiff", in the court stated above.

The nature of the suit against you is in the complaint which is attached to this document. It also states the demand which the plaintiff has made and wants from you.

You must answer the complaint in writing, by you or your attorney, within Twenty (20) days, commencing the day after you receive this summons, or judgement will be entered against you for what the plaintiff has demanded.

If you have a claim for relief against the plaintiff arising from the same transaction or occurrence, you must assert it in your written answer.

Date

Clerk, Miami Court, (Seal)

The following manner of service is hereby designated

.....
.....
Attorney for Plaintiff

*If by mail, stamped addressed envelope with return receipt attached to be prepared by attorney.

.....
.....
Telephone

ACKNOWLEDGEMENT OF SERVICE OF SUMMONS

A copy of the above summons and a copy of the complaint attached thereto were received

by me at this day of

....., 20.....

Signature of Defendant

RETURN OF SERVICE OF SUMMONS

I hereby certify that I have served the within summons:

1. By delivering on the day of, 20..... a copy of this summons and a copy of the complaint to each of the within named defendant (s).....
.....
.....

2. By leaving on the day of, 20..... for each of the within named defendant (s),
..... a copy of the summons and a copy of the complaint at the respective dwelling house or usual abode with.....
..... a person of suitable age and discretion residing therein whose usual duties or activities include prompt communication of such information to the person served.

3.
.....
.....
and by mailing a copy of the summons without the complaint to.....
..... at
.....
the last known address of the defendant (s)

All done in Miami County, Indiana.

Fees:
.....
Mileage:
.....
Total:
.....
By....., Deputy