



Docket Number:

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Plaintiff	Defendant
v.	

**ACCEPTANCE OF SERVICE**

I hereby accept service of the:

<input type="checkbox"/> <b>Summons and Complaint for:</b> <input type="checkbox"/> Divorce <input type="checkbox"/> Legal Separation <input type="checkbox"/> Parentage <input type="checkbox"/> Annulment <input type="checkbox"/> Civil Union Dissolution <input type="checkbox"/> Parentage Affidavit <input type="checkbox"/> Military Affidavit <input type="checkbox"/> Affidavit of Child Custody <input type="checkbox"/> Pro Se Appearance by <input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Completed Form 813 by <input type="checkbox"/> Plaintiff <input type="checkbox"/> Defendant <input type="checkbox"/> Blank 813 <input type="checkbox"/> Blank Answer/Counter Claim/Notice of Appearance <input type="checkbox"/> Blank Motion Response form	<input type="checkbox"/> <b>Notice of Attorney Appearance</b> <input type="checkbox"/> <b>Affidavit to Support Filing</b> <input type="checkbox"/> <b>Affidavit of Non-Compliance</b> <input type="checkbox"/> <b>Public Defender Application</b> <input type="checkbox"/> <b>Hearing Cancellation Notice</b> <input type="checkbox"/> <b>Notice of Hearing</b> <input type="checkbox"/> <b>Information Sheet</b> <input type="checkbox"/> <b>Vermont Department of Health Form</b> <input type="checkbox"/> <b>Other:</b>
<b>ORDER(S):</b> <input type="checkbox"/> <b>Child Support</b> <input type="checkbox"/> Amended <input type="checkbox"/> Interim <input type="checkbox"/> Temp <input type="checkbox"/> Final <input type="checkbox"/> Proposed <input type="checkbox"/> <b>PRR/PCC</b> <input type="checkbox"/> Amended <input type="checkbox"/> Interim <input type="checkbox"/> Temp <input type="checkbox"/> Final <input type="checkbox"/> Proposed <input type="checkbox"/> <b>Parentage</b> <input type="checkbox"/> <b>Entry Order Re: MPR #</b> <input type="checkbox"/> <b>Scheduling Order</b> <input type="checkbox"/> <b>Interim Domestic Order</b> <input type="checkbox"/> <b>Order to Attend Pro Se Education</b> <input type="checkbox"/> <b>Order to Attend COPE Education Program</b> <input type="checkbox"/> <b>QDRO (Qualified Domestic Relations Order)</b> <input type="checkbox"/> <b>Genetic Testing</b> <input type="checkbox"/> <b>Final Order: Divorce, Parentage, Dissolution, Legal Separation, etc.</b> <input type="checkbox"/> <b>Other:</b>	<b>MOTION(S):</b> <input type="checkbox"/> <b>Enforce</b> <input type="checkbox"/> Child Support <input type="checkbox"/> Final Order <input type="checkbox"/> PRR <input type="checkbox"/> PCC <input type="checkbox"/> Spousal Maintenance <input type="checkbox"/> <b>Modify</b> <input type="checkbox"/> Child Support <input type="checkbox"/> PRR <input type="checkbox"/> PCC <input type="checkbox"/> Spousal Maintenance <input type="checkbox"/> <b>Request for License Suspension</b> <input type="checkbox"/> <b>Contempt</b> <input type="checkbox"/> Child Support <input type="checkbox"/> Other <input type="checkbox"/> <b>To Show Cause – Civil Contempt</b> <input type="checkbox"/> <b>Vacate Order</b> <input type="checkbox"/> <b>Dismiss</b> <input type="checkbox"/> <b>For Emergency Relief</b> <input type="checkbox"/> <b>Other:</b>

I waive all other forms of service.

Date

Plaintiff/Defendant Signature

☐ **Plaintiff**  
☐ **Defendant**

PLEASE DATE AND SIGN THIS ACCEPTANCE OF SERVICE AND RETURN TO THE COURT.  
THE OTHER DOCUMENTS ARE FOR YOUR RECORDS.