

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

**Check your email.** You will receive information and documents at this email address.

\_\_\_\_\_  
Email

I am  Plaintiff/Petitioner  Defendant/Respondent  
 Plaintiff/Petitioner's Attorney  Defendant/Respondent's Attorney (Utah Bar #: \_\_\_\_\_)

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

|   |   |
|---|---|
| <p>_____<br/>Plaintiff/Petitioner</p> <p>v.</p> <p>_____<br/>Defendant/Respondent</p> | <p><b>Acceptance of Service</b><br/>(Utah Rule of Civil Procedure 4(d)(3))</p> <p>_____<br/>Case Number</p> <p>_____<br/>Judge</p> <p>_____<br/>Commissioner (domestic cases)</p> |
|---|---|

1. I have received the summons and complaint or petition in this case.
2. I understand that service is effective on the date I sign this document.
3. I know I can still respond to the complaint or petition in this case.

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at \_\_\_\_\_ (city, and state or country).

\_\_\_\_\_  
Date

Signature ► \_\_\_\_\_

Printed Name \_\_\_\_\_

### Certificate of Service

I certify that I filed with the court and am serving a copy of this Acceptance of Service on the following people.

| Person's Name | Service Method  | Service Address | Service Date |
|---------------|---|-----------------|--------------|
|               | <input type="checkbox"/> Mail<br><input type="checkbox"/> Hand Delivery<br><input type="checkbox"/> E-filed<br><input type="checkbox"/> Email<br><input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.)<br><input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.) |                 |              |
|               | <input type="checkbox"/> Mail<br><input type="checkbox"/> Hand Delivery<br><input type="checkbox"/> E-filed<br><input type="checkbox"/> Email<br><input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.)<br><input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.) |                 |              |
|               | <input type="checkbox"/> Mail<br><input type="checkbox"/> Hand Delivery<br><input type="checkbox"/> E-filed<br><input type="checkbox"/> Email<br><input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.)<br><input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.) |                 |              |

\_\_\_\_\_ Signature ► \_\_\_\_\_  
 Date Printed Name \_\_\_\_\_