

Name _____
(Plaintiff's name, address, and telephone number)

Address _____

Telephone _____

Plaintiff, *Pro Se*

SUPERIOR COURT OF NEW JERSEY
CHANCERY DIVISION—FAMILY PART

_____ COUNTY
(County where complaint is filed)

DOCKET NO. FM _____
(Docket number of complaint)

Name: _____ Plaintiff
vs.
Name: _____ Defendant

CIVIL ACTION
**ACKNOWLEDGMENT
OF SERVICE OF
SUMMONS
AND COMPLAINT**

The undersigned hereby acknowledges service of a copy of the summons and complaint
on this _____ day of _____, 20____.
(DO NOT WRITE IN THIS SPACE. DEFENDANT MUST FILL IN THE DATE HE OR SHE SIGNS THE DOCUMENT.)

(DO NOT WRITE IN THIS SPACE. DEFENDANT MUST SIGN HIS OR HER NAME.)

Sworn to and subscribed

before me this _____ day

of _____, 20____.

Notary Public (DO NOT WRITE IN THIS SPACE. NOTARY MUST SIGN
ON DATE THAT THE DEFENDANT SIGNS THE DOCUMENT.)