

STATE OF NORTH CAROLINA

_____ County

File No.

Film No.

In The General Court Of Justice
 District Superior Court Division

Name Of Plaintiff

VERSUS

Name Of Defendant

**DELAYED SERVICE
OF
COMPLAINT**

G.S. 1A-1, Rules 3 & 4

TO:

Name And Address Of Defendant 1

TO:

Name And Address Of Defendant 2

You are being served with a copy of the complaint in this action, the delayed filing of which was ordered when the summons was issued. You must:

1. Serve a copy of your written answer to the complaint upon the plaintiff or the plaintiff's attorney within thirty (30) days after you have been served. You may serve your answer by delivering a copy to the plaintiff or the plaintiff's attorney or by mailing a copy to one of them at his/her last known address.
2. File the original of the written answer with the Clerk of Superior Court of the county named above.

If you fail to answer the complaint, the plaintiff will apply to the Court for the relief demanded in the complaint.

Name And Address Of Plaintiff's Attorney (If None, Address Of Plaintiff)

Date

Time

AM
 PM

Signature

Deputy CSC Assistant CSC Clerk Of Superior Court

RETURN OF SERVICE

I certify that this Document and a copy of the Complaint were received and served as follows:

DEFENDANT 1

| | | |
|--------------------|---|--------------------------|
| <i>Date Served</i> | <i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM | <i>Name Of Defendant</i> |
|--------------------|---|--------------------------|

- By delivering to the defendant named above a copy of this Document and Complaint.
- By leaving a copy of this Document and Complaint at the dwelling house or usual place of abode of the defendant named above with a person of suitable age and discretion then residing therein.
- As the defendant is a corporation, service was effected by delivering a copy of this Document and Complaint to the person named below.

Name And Address Of Person With Whom Copies Left (if corporation, give title of person copies left with) Service Accepted By Defendant

| | | |
|----------------------|---|------------------|
| <i>Date Accepted</i> | <i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM | <i>Signature</i> |
|----------------------|---|------------------|

 Other Manner Of Service (specify) Defendant WAS NOT served for the following reason:**DEFENDANT 2**

| | | |
|--------------------|---|--------------------------|
| <i>Date Served</i> | <i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM | <i>Name Of Defendant</i> |
|--------------------|---|--------------------------|

- By delivering to the defendant named above a copy of this Document and Complaint.
- By leaving a copy of this Document and Complaint at the dwelling house or usual place of abode of the defendant named above with a person of suitable age and discretion then residing therein.
- As the defendant is a corporation, service was effected by delivering a copy of this Document and Complaint to the person named below.

Name And Address Of Person With Whom Copies Left (if corporation, give title of person copies left with) Service Accepted By Defendant

| | | |
|----------------------|---|------------------|
| <i>Date Accepted</i> | <i>Time Served</i> <input type="checkbox"/> AM <input type="checkbox"/> PM | <i>Signature</i> |
|----------------------|---|------------------|

 Other Manner Of Service (specify) Defendant WAS NOT served for the following reason:

| | | |
|-------------------------|----------------------|------------------------|
| <i>Service Fee Paid</i> | <i>Date Received</i> | <i>Name Of Sheriff</i> |
|-------------------------|----------------------|------------------------|

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| | | |
|----------------|-----------------------|---------------|
| <i>Paid By</i> | <i>Date Of Return</i> | <i>County</i> |
|----------------|-----------------------|---------------|

Deputy Sheriff Making Return