

# SHERIFF'S DEPARTMENT

BLAIR COUNTY, PENNSYLVANIA  
COURTHOUSE, HOLLIDAYSBURG, PA. 16648

## SHERIFF SERVICE PROCESS RECEIPT, and AFFIDAVIT OF RETURN

**INSTRUCTIONS:**  
Print legibly, insuring readability of all copies.  
Do not detach any copies. **BCSD ENV. #**

1. PLAINTIFF / S	2. COURT NUMBER
3. DEFENDANTS / S	4. TYPE OF WRIT OR COMPLAINT



5. NAME OF INDIVIDUAL, *COMPANY*, CORPORATION, ETC. TO SERVICE OR DESCRIPTION OF PROPERTY TO BE LEVIED, ATTACHED OR SOLD.

6. ADDRESS (Street or RFD. Apartment No., City, Boro, Twp., State and ZIP Code)

7. INDICATE UNUSUAL SERVICE:  PERSONAL  PERSON IN CHARGE  DEPUTIZE  CERT. MAIL  REGISTERED MAIL  POSTED  OTHER

NOW, \_\_\_\_\_, I, SHERIFF OF BLAIR, COUNTY, PA., do hereby deputize the Sheriff of \_\_\_\_\_ County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

\_\_\_\_\_  
SHERIFF OF BLAIR COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE.

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION N B WAIVER OF WATCHMAN -- Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff of any plaintiff herein for any loss, destruction or removal of any such property before sheriffs' sale thereof.

9. SIGNATURE of ATTORNEY or other ORIGINATOR requesting service on behalf of: <input type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	10. TELEPHONE NUMBER	11. DATE
---	----------------------	----------

### SPACE BELOW FOR USE OF SHERIFF ONLY – DO NOT WRITE BELOW THIS LINE

12. I acknowledge receipt of the writ or complaint ad indicated above.	SIGNATURE of Authorized BCSD Deputy or Clerk and Title	13. Date Received	14. Expiration/Hearing Date
I hereby CERTIFY and RETURN that I _____ have personally served. _____ have served person in charge. _____ have legal evidence of service as shown in "Remarks" (on reverse). _____ have posted the above described property with the writ or complaint described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., at the address inserted below by handing/or Posting a TRUE and ATTESTED COPY thereof.			

15. \_\_\_\_\_ I hereby certify and return a NOT FOUND because I am unable to locate the individual, company, corporation, etc., named above. (See remarks below)

16. Name and title of individual served	17. A person of suitable age and discretion then residing in the defendant's usual place of abode.	Read Order
---	--	------------

18. Address of where served (complete only if different than shown above) (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code)	19. Date of Service	20. Time
--	---------------------	----------

22. ATTEMPTS	Date	Miles	Dep. Int.	Date	Miles	Dep. Int.	Date	Miles	Dep. Int.	Date	Miles	Dep. Int.	Date	Miles	Dep. Int.
23. Advance Costs	24.	25.	26.	27. Total Costs	28. COST DUE OR REFUND										

REMARKS:

AFFIRMED and subscribed to before me this _____ day of _____	SO ANSWER	
_____ NOTARY PUBLIC	By (Sheriff/Dep. Sheriff) (Please Print or Type)	Date
	Signature of Sheriff	Date
	SHERIFF OF BLAIR COUNTY	

MY COMMISSION EXPIRES	I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE.	Date Received
-----------------------	--	---------------