

Person Filing: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

AZCARES Number (if applicable) \_\_\_\_\_

☐ Representing Self (No Attorney) OR ☐ Represented by Attorney

If Attorney, Bar Number: \_\_\_\_\_

## SUPERIOR COURT OF ARIZONA MOHAVE COUNTY

\_\_\_\_\_  
(Name of Petitioner/Plaintiff)

Case Number: \_\_\_\_\_

### ACCEPTANCE OF SERVICE

AND

\_\_\_\_\_  
(Name of Respondent/Defendant)

**READ CAREFULLY.** By signing your name on the next page in the presence of a Notary Public or a Clerk of the Superior Court, you are stating under oath or affirmation that you have read this document and understand its contents and that you have received and accepted the documents listed.

**Accepting these papers does not affect your right to disagree with them.**

- 1. ACCEPT AND WAIVE FORMAL SERVICE.** I waive formal service of process (service by a process server or sheriff), and understand by accepting these papers, it is the same as if I were personally served.
- 2. RESPONSE DEADLINE.** I am aware that by accepting service of these court papers does not affect my right to file a written Response or Answer to this action if I disagree. I understand that if I do not agree with any relief asked for in the Petition, I must Respond or Answer within **20** days from the day I signed the original of this Acceptance of Service and if is filed with the court, if I accepted service in Arizona, or **30** days if I received the papers somewhere other than Arizona.
- 3. DEFAULT JUDGMENT, ORDER OR DECREE.** I understand that if I do not appear and defend in this action in court, within the time allowed by law, that I may lose my right to be heard in this case. I understand that failure to Respond or Answer could result in the court giving the other party any and all things requested in his or her legal papers, through a Default Judgment, Order or Decree.

Describe below the type of case the documents you have received relate to and list each individual document received.
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**4. TYPE OF CASE:** (Title from case caption or describe) \_\_\_\_\_

I have received and voluntarily accept service of the legal documents listed below:

(List name/title of document. Example: "Petition," "Summons.")


## OATH AND VERIFICATION

STATE OF ARIZONA )  
 ) ss.  
County of Mohave )

I, swear or affirm under penalty of perjury that I have read and understand the contents of this document and that the information I have provided is true and correct to the best of my knowledge and belief.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**SUBSCRIBED AND SWORN** to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

by \_\_\_\_\_.

My Commission Expires

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Notary Public / Deputy Clerk