

**CIVIL DISTRICT COURT FOR THE PARISH OF ORLEANS
STATE OF LOUISIANA**

No.:

Division

versus

PARTY TO BE SERVED: _____

THROUGH: _____

ADDRESS: _____

SUITE/ROOM: _____

CITY: _____

SPECIAL SERVICE INSTRUCTIONS: _____

DOCUMENT TYPE: _____

FILED BY ATTORNEY: _____ **BAR NO.** _____

DATE OF FILING: _____

ATTACHMENTS/EXHIBITS: _____

RETURN FOR PERSONAL SERVICE

On the _____ day of _____, 20__
served a copy of the within _____
_____ on _____
in person _____

Return same day

Deputy Sheriff of Orleans Parish

ENTERED

PAPER

RETURN

_____/_____/_____
SERIAL NO. DEPUTY PARISH

DOMICILIARY SERVICE

On this _____ day of _____, 20__
A copy of the within _____
on _____
by leaving same at _____ domicile
or usual place of adobe _____
in the hand of _____
a person of suitable age and discretion, residing
therein as a member of _____
domiciliary establishment, whose name and other
facts connected, with this service I learned by
interrogating the said _____
being absent from _____ domicile at
time of said service.

Returned same day

Deputy Sheriff of Orleans Parish

SHERIFF'S RETURN