Person Filing:		
Address (if not protected):		
City, State, Zip Code:		
Telephone:	FOR CLERK'S LISE ONLY	
Email Address:	FOR CLERK'S USE ONLY	
Lawyer's Bar Number:		
Licensed Fiduciary Number:		
Representing Self, without a Lawyer or Attorned	ey for Petitioner OR Respondent	
SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY		
Regarding the matter of	Case No:	
(name)	ACCEPTANCE OF SERVICE	
THE PERSON WHO SIGNED BELOW MAKES 1. I acknowledge that I have voluntarily accepted		
1		
2		
3		
4		
5		
I waive formal service of process (personal service it is the same as if I were personally served under		
it is the same as if I were personally served under	r Arizona Law;	

2.	I am aware that my accepting service of these court papers and signing this document does not in any way reduce my rights or obligation to file a written objection or come to court to object.	
3.	I am not in the military forces of the United States of America in any capacity or I waive t protection of the Soldiers and Sailors Relief Act.	
	Signature	
ST	ATE OF	
CC	OUNTY OF	

(date)

Deputy Clerk or Notary Public

(notary seal)

Subscribed and sworn to or affirmed before me this:

Case No: