

# SHERIFF'S OFFICE

50 NORTH DUKE STREET, P.O. BOX 83480, LANCASTER, PENNSYLVANIA, 17608-3480 - (717) 299-8200

SHERIFF WRIT OF EXECUTION PROCESS RECEIPT, and AFFIDAVIT of RETURN										PLEASE MAKE SURE FORM PRINTS LEGIBLY								
1. PLAINTIFF/S/										2. COURT DOCKET NUMBER								
3. DEFENDANT/S/										4. TYPE OF WRIT OF EXECUTION Personal Property      Real Property Garnishment              Writ of Seizure Writ of Possession								
<b>SERVE</b>  <b>AT</b>	5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., IN POSSESSION OF PROPERTY																	
	6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code)																	
7. INDICATE UNUSUAL SERVICE: DEPUTIZE      OTHER																		
Now, _____ 20____, I SHERIFF OF LANCASTER COUNTY, PA., do hereby deputize the Sheriff of _____ County to execute the writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff _____ Sheriff of Lancaster County																		
8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE: (Specifically list personal property of Defendant, list evidence of Defendant's ownership, ie., title to vehicle from PennDOT or other proof of title in Defendant)																		
Plaintiff      Is      Is not instruction impoundment of personal property. See Rule 3109 (a)																		
<b>NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN</b> - 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 to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.																		
9. SIGNATURE OF ATTORNEY OR OTHER ORIGINATOR										Print Name			10. TELEPHONE NUMBER			11. DATE		
12. SEND NOTICE OF SERVICE COPY TO NAME AND ADDRESS BELOW:(This area must be completed if notice is to be mailed)																		
<b>SPACE BELOW FOR USE OF SHERIFF ONLY – DO NOT WRITE BELOW THIS LINE</b>																		
13. I acknowledge receipt of the writ Or complaint as indicated above										NAME of authorized LCSO Deputy or Clerk			14. DATE RECEIVED			15. EXPIRATION/HEARING DATE		
16. I Hereby CERTIFY and RETURN that I <input type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service as shown in "Remarks", <input type="checkbox"/> have executed as shown in "Remarks", 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 a TRUE and ATTESTED COPY thereof.																		
17. <input type="checkbox"/> I hereby certify and return a NOT FOUND because I am unable to locate the individual, company, corporation, ect. named above.																		
18. Name and title of individual Served (if not shown above) (Relationship to Defendant)										19. <input type="checkbox"/> No Service See Remarks Below								
20. Address of where served (Complete only if different than shown above)(Street or RFD, Apartment No., City, Boro,TWP, State and ZIP Code)										21. Date of Service			22. Time AM/PM <small>E.S.T/E.D.S.T</small>					
23. Attempts	Date	Miles	Dep. Int	Date	Miles	Dep. Int	Date	Miles	Dep. Int	Date	Miles	Dep. Int	Date	Miles	Dep. Int			
24. Advance Costs		25. Service Costs		26. Notary Costs		27. Mileage/Postage/N.F.		28. Total Costs		29. COST DUE OR REFUND								
30. Remarks																		
31. AFFIRMED: subscribed to penalties of Section 4904 of the Crimes Code (18 Pa.C.S., Section 4904) relating to unsworn falsification to authorities on this day of _____ 20 _____										<b>SO ANSWER.</b>								
										32. Signature of Dep Sheriff			33. Date					
										35. signature of Sheriff			36. Date					
<b>CHRISTOPHER R LEPPLER, SHERIFF OF LANCASTER COUNTY PA</b>																		