SAMPLE SUMMONS

IN THE COURT OF COMMONS PLEAS FOR THE STATE OF DELAWARE

IN AND FOR _____ COUNTY

Name (s))
	Plaintiff (s),)
V.) Civil Action No.
Name (s))
	Defendant (s).)

TO THE SHERIFF OF YOU ARE COMMANDED:

COUNTY,

To Summon the above named defendant(s) and serve upon said defendant(s) a copy of this summons and complaint.

TO THE ABOVE NAMED DEFENDANT(S):

Within twenty (20) days after you receive this Summons, excluding the day you receive it, you must file an Answer to the attached Complaint if you want to deny the allegations. The original of your Answer must be filed with the Clerk's Office of the Court of Common Pleas, _____

_____, Delaware and must include proof that a copy of the Answer was served on the plaintiff or his/her attorney who is named on this Summons.

Failure to file an Answer denying the allegations will result in a judgment against you, and action may be taken by the plaintiff or his/her attorney to satisfy the judgment.

DATED: _____ ____

Clerk

Plaintiff's Attorney Name Address Telephone Number