STATE OF NORTH CAROLINA		File No.		
County	In The General Court Of Justice Superior Court Division Before The Clerk			
Name Of Petitioner(s)	ESTATES PROCEEDINGS SUMMONS ALIAS AND PLURIES SUMMONS G.S. 28A-2-6			
VERSUS	Date Original Summor	s Issued		
Name Of Respondent(s)	Date(s) Subsequent Summons(es) Issued			
To Each Of The Respondent(s) Named Below:				
Name And Address Of Respondent 1	Name And Address Of	Respondent 2		
An Estates Proceeding Has been Commenced Against Y	ou!			
You are notified to appear and answer the attached petition a	as follows:			
4 51				
 File a written answer in the office of the Clerk of Superior you were served. 	Court for the cour	ity named above with	in 20 days of the date	
			·	
you were served. 2. Serve a copy of your written answer on the petitioner or the	ne petitioner's atto	rney by personal deli	very or mail at the	
you were served. 2. Serve a copy of your written answer on the petitioner or the address listed below.	ne petitioner's atto	rney by personal deli	very or mail at the	
you were served. 2. Serve a copy of your written answer on the petitioner or the address listed below. If you fail to answer the petition, the petitioner may apply.	to the Court for	rney by personal deli	very or mail at the	
you were served. 2. Serve a copy of your written answer on the petitioner or the address listed below. If you fail to answer the petition, the petitioner may apply.	to the Court for	rney by personal deli	very or mail at the	
you were served. 2. Serve a copy of your written answer on the petitioner or the address listed below. If you fail to answer the petition, the petitioner may apply.	to the Court for Date Issued Signature	the relief demande	very or mail at the d in the petition.	
you were served. 2. Serve a copy of your written answer on the petitioner or the address listed below. If you fail to answer the petition, the petitioner may apply Name And Address Of Petitioner's Attorney (if none, Address Of Petitioner) — ENDORSEMENT	to the Court for Date Issued Signature	the relief demande	very or mail at the d in the petition.	
you were served. 2. Serve a copy of your written answer on the petitioner or the address listed below. If you fail to answer the petition, the petitioner may apply Name And Address Of Petitioner's Attorney (if none, Address Of Petitioner)	to the Court for Date Issued Signature Deputy CSC	the relief demanded Time Issued Assistant CSC	very or mail at the d in the petition. AM PM Clerk Of Superior Court	

RETURN OF SERVICE								
I certify that this Summons and a copy of the petition were received and served as follows:								
RESPONDENT 1								
Date Served	Time Served	AM P	Name Of Responder	nt				
☐ By delivering to the respondent named above a copy of the summons and petition.								
By leaving a copy of the summons and petition at the dwelling house or usual place of abode of the respondent named above with a person of suitable age and discretion then residing therein.								
Name And Address Of Person With Whom Copies Left (if corporation, give title of person copies left with)								
Acceptance of service. Summons and petition re Other: (type or print name)	ceived by: Res	spondent 1.	Date Accepted	Signature				
Other manner of service (specify)								
Respondent WAS NOT served for the following reason:								
RESPONDENT 2								
Date Served	Time Served	AM PM	Name Of Responder	Name Of Respondent				
☐ By delivering to the respondent named above a copy of the summons and petition.								
☐ By leaving a copy of the summons and petition at the dwelling house or usual place of abode of the respondent named above with a person of suitable age and discretion then residing therein.								
Name And Address Of Person With Whom Copies Left (if corporation, give title of person copies left with)								
Acceptance of service. Summons and petition re Other: (type or print name)		spondent 2.	Date Accepted	Signature				
☐ Other manner of service (specify)								
Respondent WAS NOT served for the following reason:								
Date Received			Signature Of Deput	Signature Of Deputy Sheriff Making Return				
Date Of Return			Name Of Deputy S	Name Of Deputy Sheriff (type or print)				
			County Of Sheriff	County Of Sheriff				