

DEKALB COUNTY SUPERIOR COURT

STATE OF GEORGIA

_____ , <p style="text-align: center;">Plaintiff,</p> vs. _____ , <p style="text-align: center;">Defendant.</p>	Civil Action Case Number _____
--	-----------------------------------

CERTIFICATE OF SERVICE

This certifies that on _____ I served a copy of the ***Request for Final Hearing / Trial Date*** on the opposing party by ***[check one]*** first class mail certified mail, return receipt requested delivering to the person. It was mailed or personally delivered to the following person at the following address:

Dated: _____

Plaintiff Defendant, *Pro se (Check & sign)*

Name: _____

Address: _____

Phone: () _____

Email: _____

pro se Request for Trial Date -app'd 8-31-10.wpd