WARRANT IN D Commonwealth of Virginia		E (CIVIL CLAIM FOR SP DE §§ 16.1-79, 8.01-114, 8.01-1		CASE NO.  PLAINTIFF(S) (LAST NAME, FIRST NAME, MIDDLE INITIAL)		HEARING DATE AND TIME		
		CITY OR COUNTY						
		STREET ADDRESS OF CO	ed to summon the defend					
TO THE DEFENDANT(S): You are summoned to appear before this Court at the above address on  to answer the Plaintiff(s)' civil claim (see below)  RETURN DATE AND TIME						V.		
DATE ISSUED	DATE ISSUED [ ] CLERK [ ] DEPUTY CLERK [ ] MAGISTRATE					DEFENDANT(S) (LAST NAME, FIRST NAME, MIDDLE INITIAL)		
CLAIM: Plaintiff(s) clai	m the item(s	) below to be unjustly withh	eld from Plaintiff's poss	session by Defendant(s).				
ITEM		ALTERNATE VALUE	ITEM	ALTERNATE VALUE				
1.		5.						
2.		6.						
3. 4.	7.       8.			WARRANT IN DETINUE				
\$	\$	INTEREST AT THE RATE	\$	\$				
TOTAL ALTERNATIVE VALUE	COSTS	OF %	AMOUNT CLAIMED AS ATTY'S FEES	DAMAGES CLAIMED DUE TO UNJUST DETENTION	RECEIPT NO.	DATE FEE RECEIVED	$\neg$	
detention of the items by Defendant(s), attorney's fee as indicated and interest as indicated. The alternate values given are based upon [ ] actual value [or] [ ] amount due on written contract of sale for which the items were offered as security.  THE BASIS OF CLAIM IS: [ ] WRITTEN CONTRACT OF SALE [ ] OTHER (EXPLAIN)  HOMESTEAD EXEMPTION WAIVED? [ ] YES [ ] NO [ ] cannot be demanded					* * *  TO DEFENDANT: You are not required to appear; however, if you fail to appear, judgment may be entered against you. See the additional notice of the reverse about requesting a change of trial location.		JUDGMENT PAID OR SATISFIED PURSUANT TO ATTACHED NOTICE OF SATISFACTION.	
DATE [ ] PLAINTIFF [ ] PLAINTIFF'S ATTORNEY [ ] PLAINTIFF'S EMPLOYEE/AGENT					[ ] To dispute this claim, you <u>must</u> appear on the return			
[ ] JUDGMENT that Plaintiff(s) recover against [ ] named Defendant(s) [ ]					date to try this case.  [ ] To dispute this claim, you must appear on the return date for the judge to set another date for trial.		CLERK	
the exception of the following item nos.  (\$						RDERED DUE	ACCOMMODATIONS	
interest:\$ costs and \$attorney's fee						RDERED DUE	for loss of hearing, vision, mobility, etc., contact the court ahead	
[ ] and \$ costs for Servicemember Civil Relief Act counsel fees.  Homestead exemption waived? [ ] Yes [ ] No [ ] Cannot be demanded					ATTORNEY FOR PLAINTIFF(S)		of time.	
•		ant(s) [ ]				. ,		
[ ] Non-suit [ ] Dismissed					ATTORNEY FOR DEFENDANT(S)			
DATE			JUDGE					

FORM DC-414 FRONT 10/18

## RETURNS: Each defendant was served according to law, as indicated below, unless not found.

NAME	NAME		
ADDRESS	ADDRESS		
[ ] PERSONAL SERVICE Tel. No.	[ ] PERSONAL SERVICE Tel. No.		
Being unable to make personal service, a copy was delivered in the following manner:	Being unable to make personal service, a copy was delivered in the following manner:		
[ ] Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above.	[ ] Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above.		
[ ] Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.)	Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.)		
[ ] Served on Secretary of the Commonwealth	[ ] Served on Secretary of the Commonwealth		
[ ] NOT FOUND SERVING OFFICER	[ ] NOT FOUND SERVING OFFICER		
for	for		
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## **OBJECTION TO VENUE:**

To the Defendant(s): If you believe that Plaintiff(s) should have filed this suit in a different city or county, you may file a written request to have the case moved for trial to the general district court of that city or county. To do so, you must do the following:

- 1. Prepare a written request which contains (a) this court's name, (b) the case number and the "return date" as shown on the other side of this form in the right corner, (c) Plaintiff(s)' name(s) and Defendant(s)' name(s), (d) the phrase "I move to object to venue of this case in this court because" and state the reasons for your objection and also state in which city or county the case should be tried, and (e) your signature and mailing address.
- 2. File the written request in the clerk's office before the trial date (use the mail at your own risk) or give it to the judge when your case is called on the return date. Also send or deliver a copy to plaintiff.
- 3. If you mail this request to the court, you will be notified of the judge's decision.

NAME							
ADDRESS							
Tel. No.							
Being unable to make personal service, a copy was delivered in the following manner:							
[ ] Delivered to family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above after giving information of its purport. List name, age of recipient, and relation of recipient to party named above.							
[ ] Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.)  [ ] Served on Secretary of the Commonwealth							
NOT FOUND							
SERVING OFFICER							
for							
I certify that I mailed a copy of this document to the defendants named therein at the address shown therein on							
DATE [ ] Plaintiff [ ] Plaintiff's Atty. [ ] Plaintiff's Agent							
Fi. Fa. issued on							
Garnishment issued on							