## IN THE SUPERIOR COURT OF THE STATE OF DELAWARE

## SAMPLE PRAECIPE

Name of Plaintiff	) ) )
VS.	) ) Civil Action No )
Name of Defendant(s)	) ) )
	) )
Please issue	
Name and Address of each Defendant to be served	
	DI : I'M' C'
	Plaintiff's Signature Address Phone Number

TO: Prothonotary

## IN THE SUPERIOR COURT OF THE STATE OF DELAWARE

		PRAECI	PE	
VS.		) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )	Civil Action No.	
	Please issue			
			Plaintiff	
			Address	
			Phone	

TO: Prothonotary