
(Date)

(Marshal's Name)

(Address)

(City, State, Zip)

Dear Marshal:

Enclosed please find a Motion for Modification which includes an Order to Attend Hearing and Notice to be served on _____.
(name of person to be served)

The best place to serve him/her is at his/her home address at _____
_____ between the hours of _____ and _____ or at his/her
place of employment, _____, located at _____
_____, between the hours of _____ and _____.
_____ is _____ years old, _____ tall, and
(name of person to be served)

(physical description)

Please make your return of service to me and (check one)
_____ bill me directly, or
_____ submit to State of CT for payment in accordance with enclosed order to waive fees.

Please file proof of service with this court at least six days before the hearing. Please call me if you have any questions. Thank you.

Sincerely,

(Your Name)

(Your Street Address)

(Your City, State, Zip)

(Your Telephone Number)