

UNITED STATES DISTRICT COURT
MIDDLE DISTRICT OF FLORIDA
DIVISION

Plaintiff,

v.

Case No.

Defendant(s).

WAIVER OF THE SERVICE OF SUMMONS

I have received your request to waive service of a summons in this action along with a copy of the complaint.

I agree to save the expense of serving a summons and complaint in this case.

I understand that I will keep all defenses or objections to the lawsuit, the court's jurisdiction, and the venue of the action, but that I waive any objections to the absence of a summons or of service.

I also understand that I must file and serve an answer or a motion under Rule 12 within **60 days** from the date below, on which this waiver was executed. If I fail to do so, a default judgment will be entered against me.

Date: _____

Signature of the attorney

Printed Name of Party Waiving
Service of Summons

Printed Name of Attorney

Address

E-mail address

Telephone number