(county where action filed)

IN RE EMANCIPATION OF:		Case No.
		(case number assigned by clerk of the court)
(your name)	Petitioner.	PRAECIPE FOR SUMMONS (Emancipation)
Please issue summo	ons, to be served by:	
Sheriff of		County,
by personal or res	nty where person can be servidence service.	(state where person can be served)
Constable of		County,
(coun personal or reside	ty where person can be serve ence service.	ed) by (state where person can be served)
Designated deliv	very service	
_	(pu	rsuant to Neb. Rev. Stat. § 25-505.01)
Certified mail (r	eturn receipt requested)	
Please serve a cop	y of the Notice of Filin	g, Summons, and a copy of the
Petition for Judgm	nent of Emancipation up	oon:
NOTE: FILL O	OUT ONE FORM FOR	EACH PERSON TO BE SERVED.
	(name of person	n to be served)
	(street address where	person can be served)
	(city and state where	person can be served)
Service of the Notice	ce of Filing, Summons	and a copy of the Petition for
Judgment of Eman	cipation shall be at leas	t 30 days prior to the hearing date set
forth in the Summo	ons.	
Signature:		Date:
Printed Name:		
Street Address/P.O.		
City/State/ZIP Code	e:	
	:	
Email address:		