

IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA
CRIMINAL DIVISION

Defendant: _____

RE: _____

Case No(s). "ER/5;/

Certificate of Service

I hereby certify that I am this day serving upon the persons and in the manner indicated below.
The manner of service satisfies the requirements of Pa.R.Crim.P. 575.

Name: _____
(Print Name) (Signature)

Service by _____ as follows: Dated: _____
(Manner of Service)

TO: District Attorney's Office
455 West Hamilton Street
Allentown, PA 18101
610 782-3100

(Attorney for Commonwealth – Name, address & phone number)

Service by _____ as follows: Dated: _____
(Manner of Service)

TO: Court Administration
455 West Hamilton Street
Allentown, PA 18101
610 782-3014

(Court Administrator – Title, address & phone number)