



CHAIN OF CUSTODY FORM

Document Tracking — Receipt Through Service and Return

1. DOCUMENT IDENTIFICATION

Case # / Cause #:	_____	Court:	_____
Document Type:	Document Type: <input type="checkbox"/> Summons <input type="checkbox"/> Petition <input type="checkbox"/> Subpoena <input type="checkbox"/> Writ <input type="checkbox"/> Notice <input type="checkbox"/> Other: _____		
Number of Pages:	_____	Description:	_____
Received From (Client):	_____	Date/Time Received:	_____
Receipt # / Tracking #:	_____	Received By:	_____

2. CHAIN OF CUSTODY LOG

Date/Time	From	To	Method of Transfer	Condition	Purpose	Sign
___/___/___ __:__	_____	_____	<input type="checkbox"/> In-person <input type="checkbox"/> Mail <input type="checkbox"/> Courier <input type="checkbox"/> Electronic	<input type="checkbox"/> Sealed <input type="checkbox"/> Open <input type="checkbox"/> Copies <input type="checkbox"/> Original	_____	_____
___/___/___ __:__	_____	_____	<input type="checkbox"/> In-person <input type="checkbox"/> Mail <input type="checkbox"/> Courier <input type="checkbox"/> Electronic	<input type="checkbox"/> Sealed <input type="checkbox"/> Open <input type="checkbox"/> Copies <input type="checkbox"/> Original	_____	_____
___/___/___ __:__	_____	_____	<input type="checkbox"/> In-person <input type="checkbox"/> Mail <input type="checkbox"/> Courier <input type="checkbox"/> Electronic	<input type="checkbox"/> Sealed <input type="checkbox"/> Open <input type="checkbox"/> Copies <input type="checkbox"/> Original	_____	_____
___/___/___ __:__	_____	_____	<input type="checkbox"/> In-person <input type="checkbox"/> Mail <input type="checkbox"/> Courier <input type="checkbox"/> Electronic	<input type="checkbox"/> Sealed <input type="checkbox"/> Open <input type="checkbox"/> Copies <input type="checkbox"/> Original	_____	_____
___/___/___ __:__	_____	_____	<input type="checkbox"/> In-person <input type="checkbox"/> Mail <input type="checkbox"/> Courier <input type="checkbox"/> Electronic	<input type="checkbox"/> Sealed <input type="checkbox"/> Open <input type="checkbox"/> Copies <input type="checkbox"/> Original	_____	_____
___/___/___ __:__	_____	_____	<input type="checkbox"/> In-person <input type="checkbox"/> Mail <input type="checkbox"/> Courier <input type="checkbox"/> Electronic	<input type="checkbox"/> Sealed <input type="checkbox"/> Open <input type="checkbox"/> Copies <input type="checkbox"/> Original	_____	_____

3. SERVICE EVENT

Date/Time of Service:	___/___/___ __:___ AM / PM
Person Who Served:	Name: _____ Title: _____
Recipient Name:	_____
Method of Delivery:	<input type="checkbox"/> Personal service <input type="checkbox"/> Substituted service <input type="checkbox"/> Posting <input type="checkbox"/> Certified mail <input type="checkbox"/> Other: _____
Location of Service:	_____
Condition After Service:	<input type="checkbox"/> Original delivered <input type="checkbox"/> Copy delivered <input type="checkbox"/> Unsealed for review <input type="checkbox"/> Returned with notation
GPS Coordinates (if applicable):	Lat: _____ Long: _____



4. RETURN / ARCHIVAL

Date Returned to Client/Filer:	___/___/___
Method of Return:	<input type="checkbox"/> In-person <input type="checkbox"/> Mail <input type="checkbox"/> Courier <input type="checkbox"/> Electronic <input type="checkbox"/> Other: _____
Condition Upon Return:	<input type="checkbox"/> Original intact <input type="checkbox"/> Original with annotations <input type="checkbox"/> Copies only <input type="checkbox"/> Damaged: describe in notes
Copies Retained by JLS:	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, storage location: _____
Retention Period Start Date:	___/___/___ Retention period per 12 O.S. §2004(G). Verify with the court.

5. CERTIFICATION

I certify that the above chain of custody is accurate and complete. All transfers, handoffs, and service events are recorded truthfully to the best of my knowledge.

Signature: _____ Date: ___/___/___

Printed Name: _____ Title: _____

6. NOTES — Irregularities and Special Handling

Record any irregularities, observations, or special handling instructions below:

SECURITY NOTICE: This form tracks the legal chain of custody for process service documents. Each transfer requires a signature to maintain the integrity of the chain. Return of service must comply with 12 O.S. §2004(G). Verify with the court for specific local requirements.

Not a law firm. This document provides procedural information only.