IN THE 15TH JUDICIAL CIRCUIT, LAFAYETTE COUNTY, MISSOURI

Judge or Division: KELLY ANN ROSE	**Case Number:** **23LF-CV00817**
Plaintiff/Petitioner: AMERICASH LOANS OF MISSOURI LLC DBA AMERICASHLOANSNET vs.	Plaintiff's/Petitioner's Attorney/Address: WILLIAM F WHEALEN JR 13690 RIVERPORT DR STE 250 MARYLAND HEIGHTS, MO 63043 (314) 446-3300
Defendant/Respondent: WILLIAM CODY HOPKINS	Date, Time and Location of Court Appearance: **21-DEC-2023, 09:00 AM**
Nature of Suit: AC Breach of Contract	**Courtroom A** **LAFAYETTE HALL** **116 S TENTH ST** **P.O. BOX 10** **LEXINGTON, MO 64067**

(Date File Stamp)

Associate Division Alias Summons

The State of Missouri to: **WILLIAM CODY HOPKINS**
Alias:

417 E. MAIN ST.
ODESSA, MO 64076

COURT SEAL OF

LAFAYETTE COUNTY

You are summoned to appear before this court on the date, time, and location above to answer the attached petition. If you fail to do so, judgment by default will be taken against you for the relief demanded in the petition. You may be permitted to file certain responsive pleadings, pursuant to chapter 517, RSMo. Should you have any questions regarding responsive pleadings in this case you should consult an attorney.

If you have a disability requiring special assistance for your court appearance, please contact the court at least 48 hours in advance of scheduled hearing.

10/23/2023
Date

/s/ Kim Mason, Circuit Clerk
by Kelly Beckner, Deputy Clerk
Clerk

Further Information:

Sheriff's or Server's Return

Note to serving officer: Service must not be made less than 10 days nor more than 60 days from the date the defendant/respondent is to appear in court.

I certify that I have served the above Summons by: (check one)

☐ delivering a copy of the summons and petition to the defendant/respondent.

☐ leaving a copy of the summons and petition at the dwelling house or usual place of abode of the defendant/respondent with _____, a person at least 18 years of age residing therein.

☐ (for service on a corporation) delivering a copy of the summons and petition to:
_____ (name) _____ (title).

☐ other: _____.

Served at _____ (address) in _____ (County/City of St. Louis), MO, on _____ (date) at _____ (time).

_____ Printed Name of Sheriff or Server

_____ Signature of Sheriff or Server

Must be sworn before a notary public if not served by an authorized officer.
Subscribed and sworn to before me on _____ (date).

(Seal)

My commission expires: _____ Date _____ Notary Public

Sheriff's Fees, if applicable

Summons	$_____
Non Est	$_____
Sheriff's Deputy Salary	
Supplemental Surcharge	$ 10.00
Mileage	$_____ (_____ miles @ $._____ per mile)
Total	**$**_____

A copy of the summons and petition must be served on **each** defendant/respondent. For methods of service on all classes of suits, see Supreme Court Rule 54.