

Civil Unit Service Information Sheet

****If serving more than one party, please complete additional service information sheets**

Sheriff's Use Only

Service # _____ Ct Date _____ Serve Date _____

Plaintiff/Petitioner _____ Defendant/Respondent _____

Court Case # _____ Type of Service: Personal _____ Substitute _____

For Service on an Individual

Party to be Served: First _____ Last _____

Home Address _____

Work Address _____ Work days/hours _____

Personal Phone # _____ Work # _____

Physical Descriptors (date of birth, etc...) _____

For Service on a Business

Business to be Served _____ Business # _____

Name/Title of person to be served on behalf of business _____

Business Address _____

Service Information

Best time for Service _____

Possible Hazards: (circle) Guns Knives Dogs Locked Gates No Trespass Signs Officer Safety

Any other important information (vehicle, etc...) _____

Your Contact Information

Name or Business Name _____

Mailing Address _____

Telephone # _____ Email (if paying by Credit Card) _____

Sheriff's Use Only

Cash _____ Check _____ Credit Card _____ Service & Return Fee _____

Deposit Amount _____ Mileage Fee _____

Check Number _____ Total _____

Receipt/Conf # _____ Refund (if any) _____