

# CIVIL PROCESS FOR SERVICE

## DEFENDANT (Person we are serving)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

SSN \_\_\_\_\_ DOB \_\_\_\_\_

## DEFENDANT'S AUTO

Make \_\_\_\_\_ Model \_\_\_\_\_

Color \_\_\_\_\_ Year \_\_\_\_\_

License # \_\_\_\_\_

Other Info \_\_\_\_\_

## DEFENDANT'S EMPLOYMENT

Company \_\_\_\_\_

Address \_\_\_\_\_

Department \_\_\_\_\_

Hours \_\_\_\_\_ Days \_\_\_\_\_

## DEFENDANT INFO. FOR OFFICER SAFETY

Alcohol Use \_\_\_\_\_ Drug Use \_\_\_\_\_

Violent Temper \_\_\_\_\_

Dogs on Property \_\_\_\_\_

Weapons in house \_\_\_\_\_ Weapons in car \_\_\_\_\_

**PLAINTIFF** (Your Information – the defendant will not see this information)

## DEFENDANT'S PHYSICAL DESCRIPTION

Race \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_

Mailing Address \_\_\_\_\_

Hair \_\_\_\_\_ Eyes \_\_\_\_\_

City/St \_\_\_\_\_ Zip \_\_\_\_\_

Other \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

## ADDITIONAL INFORMATION:

\*\*\*\*\*FOR OFFICIAL USE ONLY\*\*\*\*\*

Officer	Person Served	Address	Date / Time	Served
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____