

DOUGLAS COUNTY SHERIFF'S OFFICE
CIVIL PROCESS INFORMATION SHEET

Received By: _____

- * List any of the following information you may have on the defendant, if unknown leave space blank.
- * Address for service MUST be in Douglas County. Please print clearly and use a separate form for each person to be served.

PERSON TO BE SERVED _____

HOME ADDRESS _____ CITY _____ ZIP _____

BEST TIME TO SERVE _____

TELEPHONE NUMBERS (H) _____ (W) _____ (C) _____

WORK ADDRESS _____ CITY _____ ZIP _____

COMPANY NAME _____

WORK HOURS (BEST TIME TO SERVE) _____

ALTERNATE ADDRESS (friend, family, or job site) _____

RACE _____ M F DATE OF BIRTH OR APPROX. AGE _____

HEIGHT _____ WEIGHT _____ EYES _____ HAIR _____

BEARD? _____ MUSTACHE? _____

TYPE OF VEHICLE _____ LICENSE PLATE NUMBER _____

COLOR _____ YEAR _____ ANY WARRANTS? _____

ANY KNOWN WEAPONS? _____ IS PERSON USING DRUGS OR ALCOHOL? _____

ADDITIONAL INFORMATION OR SPECIAL INSTRUCTIONS FOR SERVICE OF PROCESS:

YOUR NAME FOR RETURN OF SERVICE _____

(IF THE NAME ABOVE IS A COMPANY, LIST A CONTACT NAME) _____

YOUR ADDRESS FOR RETURN _____

YOUR CITY _____ STATE _____ ZIP _____

YOUR TELEPHONE NUMBERS (H) _____ (W) _____ (C) _____

INDICATE YOUR PREFERENCE FOR RETURN OF SERVICE: HOLD FOR PICKUP? _____ MAIL? _____

TEMPORARY PROTECTION ORDERS ONLY

DO YOU WANT TO BE CALLED WHEN ORDER IS SERVED? YES _____ NO _____ PHONE NUMBER TO CALL _____

IS PERSON TO BE REMOVED FROM HOME? YES _____ NO _____

If yes, the court may have awarded the person a 15-minute civil assist with law enforcement to obtain undisputed items of a personal nature. If the person is served at the home, this will be done at the time of service. If served away from the home the civil assist may need to be scheduled at a later time.

DO YOU WISH TO BE PRESENT DURING THE CIVIL ASSIST? YES _____ NO _____