

BENTON COUNTY SHERIFF'S OFFICE - CIVIL PROCESS INFORMATION SHEET

(NOTE: A \$50.00 DEPOSIT IS **REQUIRED** ON ALL SERVICES WITH THE EXCEPTION OF WRITS OF RESTITUTION (\$100.00) & ORDERS OF SALE OR EXECUTIONS (\$350.00). **PLEASE PRINT**

DATE _____ HEARING DATE _____

COURT CAUSE NO _____ COURT _____

TYPE OF PAPER (S) TO BE SERVED (LIST ALL):

- 1. _____
- 2. _____
- 3. _____

COMPLETE THE NAMES & ADDRESS(ES) OF PARTY TO BE SERVED: (USE BUSINESS ADDRESS ONLY IF SERVING ON BUSINESS) POST OFFICE BOXES ARE NOT A VALID ADDRESS!

NAME _____ SEX: M F DOB: _____
LAST FIRST MIDDLE

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

SECOND PERSON TO BE SERVED:

NAME _____ SEX: M F DOB: _____
LAST FIRST MIDDLE

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

LIST ANY SPECIAL INFORMATION KNOWN, I.E. PHYSICAL DESCRIPTION, HOURS AVAILABLE, CORPORATE OFFICERS NAME(S), ALTERNATE ADDRESS(ES):

NUMBER OF ATTEMPTS OF SERVICE AUTHORIZED (PLEASE CIRCLE): 1 2 3 4 5 AS NEEDED

I UNDERSTAND THAT THE FEES COLLECTED MAY NOT COVER THE COST OF SERVICE & MILEAGE, THAT I MAY BE BILLED IF THERE IS A BALANCE OWING. THE BALANCE DUE MUST BE PAID UPON RECEIPT OF INVOICE. I FURTHER UNDERSTAND THAT ANY FEES PAID IN EXCESS OF THE FEES ACTUALLY USED WILL BE REFUNDED TO ME AFTER THE RETURN TO COURT HAS BEEN MADE.

Signature	DOB	Phone #
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PRINT YOUR NAME & ADDRESS BELOW:

First	Middle	Last
Street	City & State	Zip

MAILING ADDRESS IF DIFFERENT FROM ABOVE: PO BOX? Please list complete mailing address, including city, state & zip
