



RISK & ASSOCIATES

County Civil Process & Judgment Enforcement

Court Officers, Deputy Sheriffs, Eviction Specialists & Process Servers

Process Server Information Form

Date _____ - _____ - _____
Month Day Year

Name: _____
First Middle Last

Address: _____
Street Address City State Zip Code

Home Phone _____ - _____ - _____ Cell Phone _____ - _____ - _____

Email Address: _____

Driver's License Number _____ - _____ - _____ - _____ - _____

Vehicle Insurance Carrier: _____ Carrier Vehicle Information _____ - _____ - _____
Year Make Model

The below physical description and date of birth information is used for producing a Process Server Identification Card only

Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____ DOB: _____ - _____ - _____
Month Day Year