



# Sauk County Sheriff's Office

## CIVIL PROCESS INFORMATION SHEET

1300 Lange Ct., Baraboo, WI 53913

(608)355-3478

Fax (608)355-3298

**PLEASE PRINT LEGIBLY**

YOUR Full Name \_\_\_\_\_

Email Address \_\_\_\_\_

YOUR Cell# \_\_\_\_\_ Home# \_\_\_\_\_ YOUR DOB \_\_\_\_\_

YOUR Address \_\_\_\_\_ Apt # \_\_\_\_\_

YOUR City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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### INFORMATION ON INDIVIDUAL TO BE SERVED

Name First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Cell# \_\_\_\_\_ Home# \_\_\_\_\_ Work# \_\_\_\_\_

Street Address \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Race \_\_\_\_\_

Employer Name \_\_\_\_\_

Employer Address/City \_\_\_\_\_

Work Schedule \_\_\_\_\_

Vehicle(s) Make/Model \_\_\_\_\_ Color \_\_\_\_\_ Plate # \_\_\_\_\_

Best Time to Serve \_\_\_\_\_

(Please note we cannot guarantee service @ any specific time as attempts are made according to time & deputy availability.)

IDENTIFIERS (Scars/Tattoos) \_\_\_\_\_

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**OFFICER SAFETY CONCERNS** (WEAPONS, CONCEALED CARRY, DOGS) \_\_\_\_\_

Additional information to aid in paper service \_\_\_\_\_