OFFICE OF THE





JEFF R. HOLLOWELL SHERIFF

ERIC PRITCHARD UNDERSHERIFF

"A Professional Service Agency"

INSTRUCTIONS TO THE SHERIFF OF INYO COUNTY

The Sheriff requires written instructions from the plaintiff or their attorney before serving court documents. (CCP 252)

WE MUST RECEIVE YOUR DOCUMENTS AT LEAST 10 DAYS PRIOR TO THE LAST DAY FOR SERVICE

			V	S			
Plaintiff			· · ·	Defend	ant		
Court Case Number			 -	Hearing	g Date (If A	Applicable)	
SERVE DOCUMENTS ON:							
DEFENDANT #1							
Name				Name o	of Employe	er	
Residence Address				Employer's Address			
City, State, Zip Code				City, State, Zip Code			
Telephone Number Description of Defendant #1:						hone Number	
Race Defendant may pose threat	Sex	Age	Height	Weight	Hair	Eyes	
DEFENDANT #2							
Name				Emplo	yer Name		
Physical Address				Employer's Address			
City, State, Zip Code				City, State, Zip Code			
Telephone Number Description of Defendant #2:					yer's Telep	phone Number	
Race Defendant may pose threat	Sex	Age	Height	Weight	Hair	Eyes	
LIST <u>ALL</u> DOCUMENTS TO BE SER	VED TO I	DEFEND	ANT(S):				
Substitute service is authorized (CCP	116.340; 41	15.20; Rul	es of Cour	t 1702)			
MAKE ALL COMMUNICATIONS TO	Name						
	Addres	SS					
			one Numbe	er	E-N	Iail Address	
X							
Signature of attorney or plaintiff (If there is no attorney of record)					Dat	e	