ELK COUNTY SHERIFF'S OFFICE SERVICE SHEET

Docket #:	Date Sent:
Plaintiff Information:	Plaintiff's Attorney Information:
Name:	Name:
Address:	Address:
Phone:	Phone:
Email:	Email:
Defendant 1 Information:	Defendant 2 Information:
Name:	Name:
Address:	Address:
Phone:	Phone:
Employer:	Employer:
D.O.B	D.O.B
SERVICE INSTRUCTIONS:	
Serve by Normal Service (Defendant or Adult-in-Charge)	Serve by Certified Mail, Return Receipt
Serve by PERSONAL Service Only	See additional forms for additional defendants
Serve by Posting Only (include Court Orde	er for Posting)
Serve Owner of Business:	
	(Company Name)
	(Name, Title)
Attempt at additional address:	
Other:	