



Office of Payson Regional Constable Colt White

David Vaughn Deputy Constable

Michelle Keegan Clerk of the Constable

CONFIDENTIAL SERVICE INFORMATION

Instructions: Please complete this form, which will be used by the Constable or other agent to serve your court papers. Please be as accurate and complete as possible. This information will not be given to the defendant.

Court: Case Type: Case No.: Your Name (Plaintiff): Address: County: City: State: Zip: Home Ph: Cell P: Work Ph: Work Hours: Work Address: County: City: State: Zip: Does Defendant know where you live? Is Defendant living with you? Does the Defendant know this Documentation is coming?

DEFENDANT'S INFORMATION

Defendant's Name (include nick names): Sex: Address: County: City: State: Zip: Home Ph: Cell P: Work Ph: Work Hours: Name of Employer: Occupation: Supervisor: Work Address: County: City: State: Zip: When can Defendant be found at home? DOB: Age: Hair Color: Hair Length: Height: Weight: Beard Mustache Glasses Scars, Marks, Tattoos: Other locations Defendant might be found: What kind of vehicle does the Defendant drive? Yr: Make: Model: Color: Lic Plate No.: State: Other identifying marks, stickers equipment etc.:

Check all that apply below and add descriptions where possible:

- Defendant has History of Drug Use:
Defendant has History of Heavy Drinking:
Defendant has History of Violence:
Defendant has Weapons:
Defendant has History of Carrying a Weapon on their Person:
Defendant has a Criminal Arrest Record:
Defendant has Warrants:
Defendant has Previous History of Domestic Violence:
Defendant has been Served Before :
Defendant will Avoid Service:

List Names, Addresses, Phone # of Friends, Relatives who may know where Defendant is:

Any other information that would help us serve your documentation: