

KITTITAS COUNTY SHERIFF – GENERAL INTAKE INFORMATION SHEET

NOTE: *If any part of this form is not complete, the service of your paperwork may be delayed.*

*****PLEASE PRINT CLEARLY*****

PRINT BILLING INFORMATION BELOW

NAME: _____ PHONE(S): _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

COURT CAUSE NO: _____ DATE ISSUED: _____ DATE TO RETURN BY: _____

SUPERIOR LOWER DISTRICT UPPER DISTRICT OTHER: _____ COUNTY: _____

TYPE OF PAPER(S)

SUMMONS SMALL CLAIMS SUBPOENA RESTRAINING ORDER

COMPLAINT PETITION NOTICE GARNISHMENT

SHOW CAUSE PARENTING INFO JUDGMENT

OTHER: _____

INFORMATION OF PARTY(S) TO BE SERVED

1ST PERSON: *If this is a business or agency, please list business information in this section.*

FULL NAME: _____

BIRTHDATE OR SSN: _____ MALE FEMALE PHONE(S): _____

STREET ADDRESS: _____ CITY: _____

ADDITIONAL INFORMATION: _____

2ND PERSON: *If 1st Person is a business or agency, please list Owner/Manager's information in this section.*

FULL NAME: _____

BIRTHDATE OR SSN: _____ MALE FEMALE PHONE(S): _____

STREET ADDRESS: _____ CITY: _____

ADDITIONAL INFORMATION: _____

SHERIFF'S OFFICE USE ONLY

\$40 Deposit – Include copy of receipt and check with paperwork

KCSO Intake Form (filled out completely)

1 copy of paperwork to be served

____ Clerk Initials