



# COLUMBIA COUNTY SHERIFF'S OFFICE

Roger L. Brandner, Sheriff

## Identification Sheet for Civil Process/Paper Service

**Person(s) to be served:**

Name \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Shift hours \_\_\_\_\_

Work Phone \_\_\_\_\_

Vehicle(s) Color/Plate \_\_\_\_\_

Comments

**For Temporary Restraining Orders/Officer Safety only:**

Does the person named above possess any firearms? \_\_\_\_\_

Where are the firearms/weapons stored? \_\_\_\_\_

**Person requesting service:**

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Contact Phone #s \_\_\_\_\_

**Is there anything else law enforcement officials should be made aware of? Please list:**