

SUPERIOR COURT OF CALIFORNIA COUNTY OF SACRAMENTO

720 Ninth Street ~ Room 102 · Sacramento, CA 95814-1380 (916) 874-5522

WWW.SACCOURT.CA.GOV

INSTRUCTIONS TO SERVE CIVIL BENCH WARRANT

(The Sheriff must have written and signed instructions by the Plaintiff representing himself/herself or the Attorney of record in accordance with California Civil Procedure Code 262.)

TYPE OR PRINT CLEARLY

| Court Case # | | | | | |
|--|---|---------------|---------------|----------|--------|
| PLAINTIFF'S NAME | | | | | |
| Clerk. Upon receipt, the Cler | ril Bench Warrant: Submit this com k will transmit the Civil Bench Warra neck for fees made payable to "THE | ant to the Sa | cramento Sh | | |
| TO THE SHERIFF you are in | nstructed to serve the attached Civil | Bench Warr | ant as follow | s: | |
| Check one box: ☐ Defendant Lives in Saci ☐ Defendant Does Not Liv | ramento County. re in Sacramento County. Name of | f county whe | re defendant | : lives: | |
| DEFENDANT'S INFORMA | TION_ | | | | |
| Name: | | | | | |
| Service address: | | | | | |
| | Address, City and | d Zip Code | | | |
| Employer or other address for | or service:Address, City and | d Zip Code | | | |
| Phone Number: | | · | | | |
| Sex: Race: | Date of birth/approx. age:_ | Ht: | Wt: | Hair: | Eyes: |
| Driver's License: | | SSN: | | | |
| Defendant may pose a thre | eat □ Yes □ No. | | | | |
| Other Instructions: | | | | | |
| PLAINTIFF'S INFORMATION | | | | | |
| Name: | | | | | Phone |
| Your Address: | | | | | E-Mail |
| City, | State, | | Zip | | Code |
| Signature: | | Da | te: | | |
| | 0 ☐ \$50.00 payable to THE SHERI fee for service, whether or not the service | | | | |