(Out of State Service) INSTRUCTIONS TO THE SHERIFF OF THE COUNTY OF RIVERSIDE

The Sheriff must have written, signed, instructions by the attorney, or the party if he/she has no attorney in accordance with CCP 262; 687.010.

Court Services • Central 30755-D Auld Rd., Ste. L067 Murrieta, CA 92563 951-304-5050 • FAX 951-304-5066	Court Services • East 46200 Oasis St., Rm B15 Indio, CA 92201 760-863-8255 • FAX 760-	Court Services • West 4095 Lemon St., 4 th Floor Riverside, CA 92501
Plaintiff	VS	Defendant
Court Case Number		Levying Officer File Number
The Sheriff is entitled to SERVE DOCUMENTS ON DEFE		t the service has been effected.
NAME:		
HOME ADDRESS:		
EMPLOYER'S ADDRESS	S:	
DESCRIPTION: / / / / Race Sex	/ / / / Age Ht. Wt.	/ / / / / Hair Eyes DOB
Vehicle(if known): Make/Model Defendant may pose three	Year/l	License Number Color:
TYPE OF DOCUMENTS TO BE	SERVED:	
LAST DAY FOR SERVICE (if app	olicable):	
IS SUBSTITUTE SERVICE ALLO	OWED? (If yes, provide add	ditional service documents for service) Yes
DOES PROOF OF SERVICE RE □ No	QUIRE NOTARIZATIO	N (If yes, additional fees are required) \square Yes
Signature of attorney (or party wi	thout an attorney)	Date
Print name of attorney (or party w	vithout an attorney)	_
Address of attorney (or party with	nout an attorney) Numbe	er, Street, City, State, ZIP Code
Telephone Number	Cell Numb	per

FAX Number

E-Mail Address