

PROCEDURES

How to Serve Court Papers by Sheriff

STEP 1: **GO.** Contact the Sheriff's Office in the county where the other party lives. Bring your court papers with you, **or** send a copy of the court papers to the Sheriff's Office if the other party does **not** live in the same county as you do. The Pinal County Sheriff's Office is located at:

Pinal County Sheriff's Office

971 Jason Lopez Circle, Bldg C

Florence, AZ 85132

1-800-420-8689

NOTICE: There are fees for service of court papers.

STEP 2: **WRITE.** If you are asking that the papers be served by a Sheriff's Department *other than* Pinal County's, fill out the attached sheet for identifying the other party and provide:

- Other party's set of copies of the court papers.
- A picture or written physical description of the other party.
- A written description of the automobile the other party drives.
- The address where other party can be served.
- **"Certified Order Waiving/Deferring Fees,"** or a \$200.00 deposit fee - cash/money order.

STEP 3: **WAIT.** The Sheriff may mail you a copy of the **"Affidavit of Service"** after the other party is served with the papers, **or** the Sheriff may file these papers instead of sending them back to you.

STEP 4: **COUNT.** Read the **"Affidavit of Service"** to find out the date the other party was served with the court papers and start counting the days the other party has to file a Response or Answer. (When counting the days, start counting with the day **after** the other party was served with the court papers.)

DO NOT BRING CHILDREN TO COURT.

 (YOUR NAME)

 (ADDRESS)

 (CITY/STATE/ZIP)

 (TELEPHONE NUMBER)

 (DATE)

 (COUNTY NAME) **County Sheriff**

 (ADDRESS)

 (CITY/STATE/ZIP) **COURT CASE NO.** _____

REGARDING: (NAME OF PERSON TO BE SERVED) _____

I enclose a copy of the following documents: (LIST ALL DOCUMENTS YOU WANT TO BE SERVED)

Please serve these papers on the other party. His or her current address and physical description are:

 (OTHER PARTY'S NAME)

 (HOME ADDRESS) _____
 (HOME CITY/STATE/ZIP) _____

 (WORK ADDRESS)

 (WORK CITY, STATE, ADDRESS)

SEX	RACE	BIRTH	HGT.	WGT.	EYES	HAIR	SSN

Please return a notarized **"Affidavit of Service"** to my address at your earliest convenience. The court requires that each document served be named in the **"Affidavit of Service."**

- I also enclose a deposit of \$200. I understand there is a \$16.00 service fee, a travel fee of \$2.40 per mile (one way), for each attempt at service, and a \$8.00 notary fee. I understand that the difference between my deposit and the fees accrued for service will be billed, or returned, to me. **OR,**
- I also enclose a certified copy of the **"Order for Waiver/Deferral of Fees for Service of Process."**

Thank you for your cooperation in this matter.

 (YOUR SIGNATURE)

Enclosures