CONSTABLE WORKSHEET

In order to expedite service, would you please provide the following information:

DEFENDANT INFORMATION:

NAME:	CAUSE #:				
PHYSICAL ADDRESS: INCLUDE COUNTY ROAD OR STRE					
GATE ACCESS CODE:	BUI	ILDING NO			
DESCRIPTION OF HOUSE:					
CITY:	_ SUBDIVIS	SUBDIVISION / TRAILER PARK:			
CELL PHONE:	WK:		OTHER:		
DESCRIPTION: M F DATE OF BI	RTH:	RACE:	HAIR: _	EYE	S:
PLACE OF EMPLOYMENT:			DAYS F	EVENINGS	NIGHTS
ADDRESS OF EMPLOYER:			CITY: _	•	
PHONE NUMBER:	IS IT IN BRAZORIA COUNTY?				
ANY VEHICLES? YR: MAKE:	_ MODEL:	C0	OLOR:	LP#:	
WHEN IS THE BEST TIME TO SERV	E THIS PERSO	ON? :			
BEST PLACE: HOME WORK	OTHER: _				
INFORMATION ON YOURSELF:					
NAME:	HOME PHONE:				
CELL PHONE:	WORK:				
ANY OTHER INFORMATION THAT V	WILL HELP E	XPEDITE THIS	S PROCESS:		