

IN THE GILA RIVER INDIAN COMMUNITY COURT

IN THE STATE OF ARIZONA

<div style="text-align: center; margin-bottom: 20px;"> _____ Plaintiff/Petitioner, </div> <div style="text-align: center; margin-bottom: 20px;"> Vs. </div> <div style="text-align: center;"> _____ Defendant/Respondent </div>	<div style="text-align: center; margin-bottom: 20px;"> Case No.: _____ </div> <div style="text-align: center;"> PROCESS SERVICE INFORMATION </div>
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THIS INFORMATION WILL BE USED TO SERVE YOUR COURT DOCUMENTS. BE AS ACCURATE AND COMPLETE AS POSSIBLE WHEN FILLING OUT THIS FORM, SO THAT PROPER AND TIMELY SERVICE OF YOUR DOCUMENT CAN BE MADE. IF YOU FAIL TO SUPPLY SUFFICIENT AND ACCURATE INFORMATION, YOUR DOCUMENTS MAY NOT BE SERVED.

REQUIRED PLAINTIFF/PETITIONER INFORMATION

Name: _____ Date of Birth: _____
 Physical Address: _____ District#: _____
 Mailing Address: _____ Phone: _____
 City: _____ State: _____ Zip Code: _____
 Place of Employment: _____
 Work Phone: _____ Work Hours: _____
 Other Information: _____

REQUIRED DEFENDANT/RESPONDENT INFORMATION

Name: _____ Date of Birth: _____
 Physical Address: _____ District#: _____
 Mailing Address: _____ Phone: _____
 City: _____ State: _____ Zip Code: _____
 Place of Employment: _____
 Work Phone: _____ Work Hours: _____
 Other Information: _____

FRIENDS OR RELATIVES THE DEFENDANT/RESPONDENT MAY BE STAYING WITH OR
WOULD KNOW OF THEIR WHEREABOUTS

NAME	ADDRESS	PHONE	RELATIONSHIP

IF YOU ARE UNABLE TO PROVIDE A WRITTEN PHYSICAL ADDRESS,
PLEASE DRAW A MAP IN THE BOX ON THE ATTACHED SHEET.

MAP

Include street names and landmarks.

N

S

Directions and Building Description:
