



SUFFOLK COUNTY SHERIFF'S DEPARTMENT

CIVIL PROCESS DIVISION

Steven W. Tompkins, Sheriff

132 Portland Street, Boston, MA 02114 • Tel. (617) 704-6999 • www.suffolksheriffma.org



SERVICE REQUEST DROP-OFF FORM

(Note: Please PRINT CLEARLY)

1. PRO SE PLAINTIFF or ATTORNEY Information: *(Please Check One)*

Name: _____

Address (including Apt #, Suite #, etc.): _____

Best Phone Contact Number (Required): () _____ - _____

Phone for Text Message: () _____ - FAX: () _____ - _____

Email: _____

2. DEFENDANT Information (the Party to be Served):

Name: _____

Address (including Apt #, Suite #, Floor #, etc.): _____

Best Phone Contact Number: () _____ - _____

3. Please describe any special instructions or circumstances to ensure proper delivery of Service:

(FOR OFFICE USE ONLY)

RUSH

Court Date is: _____

Serve By Date is: _____

Request Proof of Service: Mail* FAX* Email

Call & Hold For Pick-up

IN-HAND Service is Required

Advance Payment: \$ _____

RUSH: \$ _____

Other: \$ _____

Approval Code: _____

Total Amount Paid: \$ _____

Method of Payment:

Credit / Debit Card

Cash

Money Order

Law Firm

Fee Waiver

Received by: SCSD Staff Member Initials / Date / _____

*** Please see www.suffolksheriffma.com/about/ for fee schedule**