DIRECTIONS TO SHERIFF
MUSCATINE COUNTY, IOWA

ACTION:_____ VS_____ #:_____
PLAINTIFF/CREDITOR DEFENDANT/DEBTOR COURT CASE NUMBER

Serve the attached: Notice_____Writ_____Order_____Subpoena_____FED_____Other_____

Person(s)/Corporation to be served:_____

Address:_____

Alternate address:_____

Home phone number:_____Cell number:_____

Employed at:_____Hours:_____

Address:_____

Serve the attached Garnishment: Wages_____Bank_____Personal Demand_____

Wage Garnishment/ Employer:_____

Address:_____

Bank Garnishment/Bank:_____

Address:_____

Depending on the Employer and Bank they require the below information in order to garnish. We will attempt service without the information however there is no guarantee funds will be collected without identifiers. You will still have to pay the approximate $95.00 service fee. Fill out at least Person being garnished and address for Personal Demands.

Person being garnished:_____

Address:_____

Date of Birth_____SS# and or DL#_____

Bank Account Number (if garnishing at a bank):_____

CHECK HERE IF CONSUMER CREDIT TRANSACTION:_____

Name of person requesting service:_____

Address:_____
STREET CITY STATE ZIP

Telephone:_____