



SUMNER

POLICE DEPARTMENT

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C. Wilson, Chief of Police

SUBPOENA SERVICE REPORT

DATE: _____ CASE # _____ DOCUMENT # _____

Name _____				
Last	First	Middle		
Address _____				
DOB _____	SEX _____	RACE _____	HGT _____	WGT _____
		EYES _____	HAIR _____	
ASSOCIATED VEHICLE _____				
	Make	Model	Year	License #

Cautions: _____

Remarks: _____

Respondent signature _____

Date _____ Time _____