

WASHOE COUNTY SHERIFF'S OFFICE CIVIL SECTION INSTRUCTIONS FOR EXECUTION PLEASE FILL OUT COMPLETELY

DATE:				CASE # _		
DI A INTERIOR	.		VS	DEFEND	A NIFE	
PLAINTIFF PLAINTIFF ADDRESS: c/o (if applicable) Number & Street Name				DEFENDANT ADDRESS: c/o (if applicable) Number & Street Name		
City	State	Zip		City	State	Zip
PLAINTIFF PHONE:				DEFENDANT SS#:		
	CH THE WAGES C)F:				
	CII IIIE WAGES C	Last	First		Middle	;
		ment:et Name	City		State	Zip Code
			OR			
	UTE ON THE BAN	K OF:				
Bank / Cre	edit Union:					-
Address o	f Bank / Credit Unio	Number & Street Name	City		State	Zip Code
Account N	Number (s):					
			OR			
☐ TAP T	HE TILL OF BUSIN	NESS KNOWN AS:				
Located a	t: Number & Street Na		City		State	Zip Code

INCLUDE: 1) Original and three (3) copies of Execution

- 2) Check made payable to the Washoe County Sheriff's Office for fees.
- 3) \$5.00 check made payable to the Garnishee (Employer or Bank/Credit Union)