



_____ COUNTY SHERIFF'S OFFICE
CERTIFIED PROCESS SERVER
LOST/STOLEN CREDENTIAL REPLACEMENT FORM
FORM 5

Pursuant to Article 9(B)(2) of the Georgia Certified Process Servers Rules and Regulations, "certified process servers shall report lost or stolen identification cards to the certifying sheriff within three days of discovery of the loss. Upon filing a loss form with the certifying sheriff and payment of a replacement fee, the certifying sheriff shall request and be issued a replacement credential from the Georgia Sheriffs' Association Inc."

1. _____
Name of Process Server Requesting Replacement I.D. (printed)

2. Do you know what your credential badge number was? If so, please provide: _____

3. Do you know the date of your certification? If so, please provide: _____

4. Do you know the date of your certification expiration date? If so, please provide: _____

5. Have you completed the annual 5-hour continuing education course required of certified process servers?
Yes No If no, explain _____

*In the event you find the original credential badge, you are required to forward the **original** credential to:*

*Bill Hallsworth
Coordinator, Jail & Court Services
Georgia Sheriffs' Association Inc.
P.O. Box 1000
Stockbridge, GA. 30281*

By signing below, I acknowledge that I have read this notice and fully understand its contents. Furthermore, I acknowledge that I have been provided a copy of this notice.

Process Server's Signature

Date

Witness

Date