

Informative

Attorney Services, Inc.

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Date:

Confirmation #:

Firm Name:

Phone:

Attorney Name:

Secretary/Paralegal:

Ref/Billing #:

Client Matter:

Non Stop Express

Hot Rush

Regular

Round Trip

Run Called At:

Court Services Instructions:

File in Dept.:

Pouch

Court: _____

Filing

Research

Advance Fees

Case#: _____

Return Same Day

Next Day

Mail Back

Case Name: _____

VS.

Fees Attached: Amount \$ _____

Hearing Date: _____

Documents to be Filed: _____

Special Instructions: _____

Service of Process:

Personal Service

Substituted Service

Custodian of Records

Service Deadline: _____

Driver #: _____

Status: _____

Documents to be Served: _____

Person to be Served: _____

Description or Instructions: _____

Home Address: _____

Apt #: _____

Business Address: _____

Suite #: _____

City: _____

State: _____

Zip: _____

City: _____

State: _____

Zip: _____

Messenger or Delivery Instructions:

Pickup From: _____

Deliver To: _____

Address: _____

Suite #: _____

Address: _____

Suite: _____

City: _____

State: _____

Zip: _____

City: _____

State: _____

Zip: _____

Received By: _____

Time: _____

Date: _____

Delivery: \$ _____

Personal Service: \$ _____

Court/Run: \$ _____

RT: _____

Weight/Boxes: \$ _____

Special Circumstances: _____

Fees Advanced: \$ _____

Check Fee: \$ _____

Other: \$ _____

Waiting Time: \$ _____

Reason: _____