



# PROCESS SERVICE INSTRUCTIONS

Client Name & Address:

County:

Court Branch/Location:

Limited  Under 10K  Over 10K  Unlimited  U.D.

Telephone:

Case Number:

Fax Number:

Case Title:

Contact:

Documents to be Served:

File Number:

Summons and Complaint      Summons and Petition      Small Claims      Subpoena      Unlawful Detainer

OTHER / ADDITIONAL DOCUMENTS (Please List):

**SPECIAL INSTRUCTIONS: Please note any time requirements!**

**ROUTINE** (Attempted within 48 hours)  
 **RUSH** (Same Day Dispatch w/ Daily Attempts)  
 **ON DEMAND** (Immediate Dispatch)  
RUSH / ON DEMAND Charges Approved by:

Last Day to Serve: \_\_\_\_\_ Deadline Runs on: \_\_\_\_\_

File Proof of Service?    Yes    No    Is ACS the Deposition Officer?    Yes    No

Name: \_\_\_\_\_

HEARING DATE: \_\_\_\_\_ IN DEPT/DIV: \_\_\_\_\_

**ADVANCE WITNESS FEES?**  
A 10% Check Charge will be added (\$3.00 Min.)

HEARING TIME: \_\_\_\_\_  AM  PM

Amount: \_\_\_\_\_

**Party to be Served #1:**

Residence Address & Phone No.:

Business Name, Address & Phone No.:

Additional Instructions:

Sex	Age	Lbs	Height	Hair	Skin

**Party to be Served #2:**

Residence Address & Phone No.:

Business Name, Address & Phone No.:

Additional Instructions:

Sex	Age	Lbs	Height	Hair	Skin