



Attorney's Messenger Service

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31 H Street • Bakersfield, CA 93304

COURT SERVICE FORM

INV. #

DATE SUBMITTED

STATUTE DATE

DO TODAY

ACCOUNT #

FIRM NAME & ADDRESS:

[Red outlined box for firm name and address]

COURT / DESTINATION

[Box for court/destination]

BRANCH / DIV. / COUNTY:

[Box for branch/div./county]

CASE #:

[Box for case number]

CASE TITLE:

[Box for case title]

PHONE #:

[Box for phone number]

FAX #:

[Box for fax number]

CONTACT:

[Box for contact name]

BILLING / FILE #:

[Box for billing/file number]

DOCUMENTS:

[Large box for documents]

INSTRUCTIONS:

PLEASE NOTE ANY TIMELY OR SPECIFIC FILING REQUIREMENTS

- FILE
ISSUE
RECORD
CONFORM
COPY / RESEARCH
CERTIFY
ADVANCE FEES
CHECK ATTACHED: \$

LAST DAY TO FILE:

[Box for last day to file]

HEARING DATE:

[Box for hearing date]

DEPT/DIV:

[Box for dept/div]

ADDITIONAL / SPECIAL INSTRUCTIONS:

[Large box for additional instructions]

Payment Method: Bill Firm Check Enclosed Bill Credit Card per attached Credit Card Authorization Form

REPORTS / COMMENTS (For AMS Legal Services use only)

[Large box for reports and comments]

ASSIGNMENT COMPLETED BY DATE

REJECTED - REASON:

ATTORNEY CALLED - SPOKE TO: DATE

Table with columns: BILLING ITEM, CHARGE. Rows include: ADVANCE FEES, CHECK CHARGE, INDEX/RESEARCH, PULL FILE, COURT WAITING TIME, RECORDER, DO TODAY, OUT OF AREA FILING, TOTAL.

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