

Bakersfield:

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COURT SERVICE FORM

INV.#

DATE SUBMITTED	STATUTE DATE	DO TODAY	ACCOUNT #
FIRM NAME & ADDRESS:		COURT / DESTINATION	BRANCH / DIV. / COUNTY:
		CASE #:	
		CASE TITLE:	
PHONE #:			
FAV.		DOCUMENTS:	
FAX #:			
CONTACT:			
BILLING / FILE #:			
INSTRUCTIONS: PLEASE NOTE ANY TIMELY OR SPECIFIC FILING REQUIREMENTS			
FILE ISSUE	LAST L	PAY TO FILE: HEARING DAT	E: DEPT/DIV:
RECORD	ADDITI	ONAL / SPECIAL INSTRUCTIONS:	
CONFORM	ADDITI	UNAL / SPECIAL INSTRUCTIONS.	
COPY / RESEARCH			
CERTIFY			
ADVANCE FEES CHECK ATTACHED: \$			
Payment Method: Bill Firm	Check Enclosed E	Bill Credit Card per attached Cre	edit Card Authorization Form
REPORTS / COMMENTS (For A			BILLING ITEM CHARGE
			ADVANCE FEES
			CHECK CHARGE
			INDEX/ RESEARCH
			PULL FILE
ASSIGNMENT COMPLETED BY		DATE	COURT WAITING TIME
			RECORDER
ATTORNEY CALLED - SPOKE	TO:	DATE	DO TODAY
			OUT OF AREA FILING
Use of this form creates a contract. AM	S Legal Services, Inc. shall not be lia	able for more than \$100 per assignment.	TOTAL