



Attorney's Certified SERVICES

BAKERSFIELD
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1155 N. First Street, Ste. 100, San Jose, CA 95112

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Order Date: _____

COURT FILING 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:

File Number: _____

Summons and Complaint Answer to Complaint Dismissal / Satisfaction Default Judgment Motion

FEES ATTACHED \$ _____ CHECK # _____ **57G 58J 5B79 : @B ; : 99G3**

DEFENDANT/RESPONDENT FIRST APPEARANCE FEES PAID? NO YES A 10% Convenience Fee (\$3.00 Min) is added when ACS advances fees **5A CI BH: ~**

SPECIAL INSTRUCTIONS: Please note any filing requirements!

Last Date to File: _____ Date Statute Runs on: _____ Date

RUSH ASSIGNMENT

Additional Charges Approved by: (If Applicable)

Return by: _____ Date Name: _____

HEARING DATE: _____ HEARING TIME: _____ AM PM IN DEPT/DIV: _____

FILE RESEARCH ISSUE RECORD OBTAIN COPIES Plain Certified

ADDITIONAL INSTRUCTIONS: _____

FOR ATTORNEY'S CERTIFIED SERVICES ONLY – PLEASE DO NOT PRINT OR TYPE BELOW THIS LINE

Submitted on: _____ Date Completed on: _____ Date

OBTAINED "RECEIVED" FACE PAGE (S) RESEARCH TIME: _____

OBTAINED "FILED" FACE PAGE (S) FEES ADVANCED: _____ Dollar Amount _____ Check No.

DOCUMENTS REJECTED - Rejection Slip Attached

DOCUMENTS REJECTED without Formal Rejection Slip CLIENT NOTIFIED BY PHONE CLIENT NOTIFIED BY FAX

Reason for Rejection: _____ SPOKE WITH NAME: _____ FAXED TO NAME: _____