



S E R V I C E S
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Please reference KNOX FILE#



PRIORITY
 Affiliates Satewide
and
 Nationwide

Stephen L. Knox
 PRESIDENT
 John Maguire
 VICE PRESIDENT
 Stephen D. Olch
 GENERAL MANAGER
 IRS# 33-0664190

SERVER:

PROCESS INSTRUCTION FORM

Date: Check Correct Box **SERVICE OF PROCESS** **FILING** **DELIVERY** **COURT RESEARCH** **SKIP TRACE** **WRIT SERVICE**

FIRM NAME AND ADDRESS: **CLIENT/BILLING INFORMATION**
 ACCT#: **APPROVED DIRECT INSURANCE BILLING**

ATTORNEY/BAR #: PHONE:
 ATTENTION: FAX:
 REPRESENTING: PL PE DE RE OTHER ATTORNEY'S FILE NO.:

INSURED:
 CLAIM NUMBER:
 DATE OF LOSS:

COURT CASE INFORMATION

COURT **CASE NO.**

CASE NAME **DATE OF HEARING:**

TIME: AM PM / DEPT.

LOCATION INFORMATION \$

ENTITY TO BE SERVED/DELIVERED/FILED

DOCUMENTS/ITEMS
 FILING FEES/WITNESS FEES ATTACHED
 S&C S&C/UD SUB SUB/DT
 OTHER:

SIGNATURE: X

BUS RES ADDRESS AND TELEPHONE NUMBER
 1

BUS RES ADDRESS AND TELEPHONE NUMBER
 2

PHONE NO. ZIP CODE **PHONE NO. ZIP CODE**

SPECIAL INSTRUCTIONS

STATUS DUE BY: **CONFIRMATION**
LAST DAY TO SERVE: **CALL BACK REQUIRED:**

IS KNOX THE DEPO OFFICER? YES NO

FOR OFFICE USE ONLY

STATUS INFORMATION			FOR OFFICE USE ONLY			
DATE SERVED	AM PM TIME SERVED	SERVER INITIALS	ACTIVITY CODE	C O D E SERVICE AMOUNT	C O D E SERVICE AMOUNT	C O D E SERVICE AMOUNT
<input type="checkbox"/>	I HAVE STATEDUSED CLIENT			1 DOCUMENT FEE	9 TELEPHONE	13 BAD ADDRESS
<input type="checkbox"/>	CC'S RET'D ON:			2 COURT SERVICES (FILING)	10 MAILING	14 MILEAGE ATTEMPTS
<input type="checkbox"/>	P.O.S. RET'D ON:			3 DELIVERY	11 STAKE-OUT	15 FIELD LOCATE
<input type="checkbox"/>	REQUIRED DROP:			4 COURT SERVICES (RESEARCH)	11 WAITING TIME	16 DOCUMENT PREP
	SPOKE TO:			5 SKIP TRACING	12 OVERNIGHT MAILING	17 PREPAID
	DATE:	/TIME		6 SPECIAL OR RUSH	12 SPECIAL HANDLING (FAX)	18 CK #
				7 FEES ADVANCED	12 SPECIAL HANDLING (MILITARY)	19 OTHER
				8 CHECK CHARGE	12 SPECIAL HANDLING (PRISON)	20 OTHER