



S E R V I C E S
 1155 N. First Street
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 San Jose, CA 95112
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Please reference KNOX FILE#



PRIORITY
 Affiliates Satewide
and
 Nationwide

Stephen L. Knox
 PRESIDENT
 John Maguire
 VICE PRESIDENT
 Terry Ashman
 AREA MANAGER
 IRS# 95-3057541

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:
 ATTORNEY'S FILE NO.:

REPRESENTING: PL PE DE RE OTHER

CARRIER NAME:
 ADDRESS:
 CITY, STATE & ZIP:
 ADJUSTER:
 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 1	SERVICE AMOUNT	C O D E 2	SERVICE AMOUNT	C O D E 3	SERVICE AMOUNT
<input type="checkbox"/> I HAVE STATEDUSED CLIENT				1	DOCUMENT FEE	9	TELEPHONE	13	BAD ADDRESS
SPOKE TO:				2	COURT SERVICES (FILING)	10	MAILING	14	MILEAGE ATTEMPTS
DATE: /TIME				3	DELIVERY	11	STAKE-OUT	15	FIELD LOCATE
<input type="checkbox"/> CC'S RET'D ON:				4	COURT SERVICES (RESEARCH)	11	WAITING TIME	16	DOCUMENT PREP
<input type="checkbox"/> P.O.S. RET'D ON:				5	SKIP TRACING	12	OVERNIGHT MAILING	17	PREPAID
<input type="checkbox"/> REQUIRED DROP:				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