

A-1 Budget Process Service - Request Form

870 N. Plano St. Ste. 125 Porterville, CA 93257 (866) 753-3313 Voice/Fax Email: servenow@albudgetprocess.com
Additional fax number: (661) 846-7681 This form may be included with documents via fax, e-mail, or mail delivery

DELIVERY: ROUTINE PRIORITY RUSH OTHER: _____
SUBSTITUTE SERVICE: OKAY AFTER DUE DILIGENCE NOT ACCEPTABLE/APPLICABLE

ATTORNEY/REQUESTING PARTY NAME: _____

ADDRESS: _____ | TELEPHONE: _____

_____ | FAX: _____

_____ | EMAIL: _____

CASE NAME: _____

CASE NO: _____ COUNTY: _____

PARTY TO SERVE: (Fill out as much as possible)

NAME/BUSINESS _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

is this address: BUSINESS RESIDENCE EMPLOYMENT UNKNOWN

PHONE NUMBER: () _____ PHONE TYPE: _____

PARTY DESCRIPTION: RACE _____ AGE _____ HEIGHT _____ WEIGHT _____

EYE COLOR _____ HAIR COLOR _____ VEHICLE: _____

Other information which may be helpful: _____

TERMS AND CONDITIONS: A-1 Budget Process Service offers unlimited service attempts on addresses where the subject is non-evasive (not purposefully and actively avoiding service). Mileage and third-party restrictions may also apply. Additional services may be required for evasive subjects. No service is billed without prior consent or authorization. Substitute service will be utilized after 5-7 attempts whenever applicable unless otherwise instructed. We are under no obligation to provide/pursue service or verification of service in the event that payment or payment arrangement has not been made.

DATE: _____

Printed Name Requesting Party

Signature