Franklin Paralegal Services

Fax 360-529-5826 Email: Franklinparalegals@gmail.com

Today's Date					
Agency/Attorney	Name				
Contact Person			Contact Number		
Street Address					
City			_State	Zip Code	
Case Name			_ Case #		
Number of sets to Serve	Serve by date	Last date for Filing	County	Court	Call, Email Or Fax when complete?
	Check any	that apply and/or	provide instruct	ions below:	
	ne Day or Emerger	·	rvice: Includes 3 .	•	
Substitute — E with any current Corporate — E Notarized Aff	delivering copy to By delivering copy co-resident, there By delivering copy idavit of Service (to the named party to the residence/ in of suitable age to the Registered \$10.00 additional	of Service: y in the action ex usual place of ab per rule of court Agent, Officer of fee applies).	ode of party. Le r authorized em	ployee.
Name:			Place of Employment:		
Description: Age M F Race HT: Approx. WT: Hair Color Distinguished marks:			Address: Phone:		
Address:			Vehicle(s) make & model		
Phone			Is he or she known to be violent? if yes explain:		
		Do not write b	pelow this line		
Served to: Description of pe	rson served: Age		Title:		Date:

Served by: ______ Time: _____

Server Notes: