

THE LEGAL PROCESS

P.O. BOX 15712, SAN DIEGO, CA 92175

LOS ANGELES 213.291.0758 | ORANGE 714.453.9839 | RIVERSIDE 951.742.8921
SAN BERNARDINO 909.522.4415 | SAN DIEGO 619.270.1145 | FAX 619.245.2400

REQUEST FOR LEGAL SERVICES

Name/Firm: _____ Date: _____
Address: _____ Court: _____
City, State, Zip _____ Case No.: _____
Telephone: _____ Case Title: _____
Ext./Direct Line: _____
Your Fax No.: _____ Claim/File No.: _____
Attention: _____ Date of Loss: _____

PLEASE INFORM US OF ANY SPECIFIC OR TIMELY FILING OR SERVICE REQUIREMENTS

PLEASE CHECK THE REQUIRED SERVICES:

SEARCHES:

Asset - Basic Skip
 Asset - Extensive Skip
 Asset - Specific Requests
 Asset/Liability - Basic
 Asset/Liability - Extensive
 Subrogation - Locate/Asset
 Locate - Basic Skip
 Locate - Extensive Skip

Locate - Due Diligence
 Employment Search
 Pre Employment Background
 Background Investigation
 National Public Records
 Public Records Retrieval
 Stake Out - Process Service
 Title - Basic/Extensive Search

OTHER SEARCHES:

Electronic Debugging
 Event Security
 Executive Protection
 Security Consulting
 Security Surveys & Audits
 Security - All Locations
 Surveillance - Activity Check
 Database - Locate/Asset

Photography/Videography
 Statements & Interviews
 Insurance Claim Investigation
 Undercover Operation
 Trademark Protection
 International Investigations
 Process Service/Messenger
 Mobile Document Photocopy

TYPE: INDIVIDUAL BUSINESS

SUBJECT OF REQUEST:

Full Name: _____ Spouse: _____
AKA's: _____ Date of Birth: _____ Subject: _____ Spouse: _____
Business Name: _____ Check if Known: Corp. Partnership DBA Individual
Last Known Residence: _____
City: _____ State: _____ Zip: _____ Telephone: _____
Last Known Address: _____
City: _____ State: _____ Zip: _____ Telephone: _____
Employed By: _____ Telephone: _____
Address: _____ City: _____ State: _____ Zip: _____
Social Security No.: _____ Subject: _____ - _____ - _____ Spouse: _____ - _____ - _____
Driver's License No.: _____ Subject: State _____ # _____ Spouse: State _____ # _____
Business Tax ID No.: _____ Federal Tax ID No.: _____

OTHER HELPFUL INFORMATION:

Please attach copies of credit application, police report, or any other pertinent information. Remember, the more information we possess, the greater the probability of our success. Provide spousal information when available.

Do not exceed \$ _____ without further authorization.