

File Number:

Received in Office on:



Process Serving Instructions

Maryland Process Server

9132A Bay Avenue #591
North Beach, Md. 20714

Summons Issue Date:

Client:

Trial Date:

Court Name:

Case No:

Phone:
Contact:

Plaintiff:
Defendant:

Documents to Be Served:

In the event substituted service is required,
please provide 2 sets of each document to be served.

Last Date to Serve:

Is Service Fee Attached?

No Yes Amount: \$

Name of Party to Be Served:

If service is upon a corporation or partnership, please
indicate name of partner, officer and title, or agent
for service.

Home Address:

Phone:

Business Address:

Phone:

Physical Description:

Race:

Sex:

Age:

Eyes:

Height:

Weight:

Hair:

Beard:

Mustache:

Glasses:

Other: _____

Special Instructions:

(if any) _____

MAKE CHECKS PAYABLE TO **METRO PROCESS**