

# ALASKA DIRECT PROCESS

Alaska Direct Process, LCC  
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Attorney/Client:

Address/City/State/Zip

Person to Contact

Phone

Your File No.

Date filed with Court	Serve by (date)	Are Daily Updates Required? Yes      No	Notify When Served? Yes      No	Our File No.
vs.		List All Documents to Serve:		
Case No.: _____				
Person to serve/Title	Social Security Number	Date of Birth	Drivers License	
Business/Corporation Name				
Home Address			Home Phone:	
Work Address/Job Description			Work Phone:	
Directions to Process Server or Additional Information				
Judgment / Writ Information:				
Amount of Judgment: _____ Interest Rate: _____				
Date of Judgment: _____ Date of Issuance of Writ: _____				
Person Served/Title _____ Date _____ Time _____ A.M. / P.M. Server: _____				
Same-Day / Rush / Pick Up / Issuance _____ Mileage _____ @ \$.50 Investigation Fee \$ _____				

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