



Document Research – Retrieval
 Photocopy – Scanning Request Form
 TOLL FREE: (888) 778-2711 – Fax: (805) 777-1115
 Fax form or Scan & Email to Process@Amstarexpress.com

Client Name: _____ Address: _____ City: _____ State, Zip: _____ Telephone: _____ Ext./Direct Line: _____ Your Fax No.: _____ Attention: _____ E-Mail: _____	Date: _____ Job # _____ Court or Facility: _____ County: _____ State: _____ Case No.: _____ Case Title: _____ _____ Claim/File No.: _____ Date of Loss: _____
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Please Indicate the Type of Copies you Require and EXACT name of Documents Requested

Type: Regular Copies Certified Copies

Check One Box Below

- I request Certified copies of above document and I agree that the above services will be provided for a fee of \$ _____ + Research time calculated at \$40.00 Per Hour Pro-Rated + Costs for Certified Copies + Courier Delivery Fee or Fee for Mailing of Certified Copies.
- I request copies to be emailed to me and I agree that above service will be provided for a fee of \$ _____ + Research time calculated at \$40.00 Per Hour Prorated + Copy & Scanning fee of \$.75 per page for Documents to be emailed.
- I request hand delivery of regular copies of documents requested and agree that above services will be provided for a fee of \$ _____ + Research time calculated at \$40.00 Per Hour Pro-Rated + a Copy Fee of \$.50 per page + delivery fee.

I understand and agree that there will be a cancellation fee on Research/Photocopy assignments if job has been initiated and said fee is dependent upon amount of resources already expended at time of cancellation

I agree that the information provided above is accurate to the best of my knowledge and I authorize Amstar Express to provide the above listed services.

Date: _____ Client Signature _____