

RESEARCH AND INDEXING INSTRUCTIONS



Date: _____

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Attorney: _____

Secretary: _____ / Phone _____

Case Title: _____ / Number _____

County: _____

Municipal Superior Other: _____

If research is for a specific individual, please specify name: _____

Research instructions: _____

RUSH REGULAR

Requested time frame: _____

FOR OFFICE USE ONLY

Cost estimate \$: _____
Additional fees _____
Hourly rate _____
Hourly rate _____
Hourly rate _____
Hourly rate _____

\$: _____
Date/Time _____
Date/Time _____
Date/Time _____
Date/Time _____
Date/Time _____

NO CHARGE _____

Subtotal: _____

Confirmed by _____

Confirmed with _____

Billing Total: _____