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	MESSENGER REQUEST FORM														
MESSENGER	R SERVICE	FIRM NA	ME (Required	1)	PHONE (R	PHONE (Required) EXT			EMAIL (SECRETARY)						
LAST	DAY														
DATE/	TIME	ADDRESS CITY					STATE				ATTORNEY				
CASE NAME											SECRETARY				
	CAUSE # CLIENT					T MATTER/REFERENCE #				DATE/TIME					
DOCUM	DOCUMENTATION														
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☐ SIGNATURE REQUIRED ON DOCUMENT ☐ RETURN CONFORMED SLIP ONLY							RETURN CONFORMED COPY					CONFORM ORIGINAL DO NOT FILE			
OTHER INSTRUCTIONS															
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Jeffrey Brooks assumes no liability for errors caused in whole or in part by the improper filling out of this messenger service request form, including but not limited to omission of a last day date/time filings not marked in the proper and designated filing boxes, illegible print or script, etc. All messenger request are double checked for accuracy and completion prior to returning to the requestor, however, it is the responsibility of the requestor to also check the completed request form for accuracy and to notify us immediately if there are any questions or discrepancies. Usage of this form constitutes a contract between the requestor and Jeffrey Brooks and acknowledgement and acceptance by the requestor of the term set forth above.