



NY Server LLC
 Corporate Billing Office
 173 North Main Street #375
 Sayville NY 11782

Invoice/Order #:

Date:

Product	Description of Services Request (Client Fill IN Below)	Total
	LIST THE ADDRESS AND THE NAMED PARTY BEING SERVED	
	WRITE THE CHARGE TO YOUR CREDIT CARD TOTAL COLUMN	
Sample	John Doe 123 Main Your Town USA 01234 (Sub Serviceable/Corporate/Personal Only)	10.00

I have read and understand the attached billed invoice from NY Server LLC. This is not a guarantee of success due to complexity of Process Serving in general. Examples; subject not being available, moved from same, incorrect information forwarded to service company. Additional services verbally approved encompass additional attempts of service exceeding first 3 attempts and or a different address. I hereby agree to compensate fully NY Server LLC.

Payment Authorization Credit Card Type: (CIRCLE) VISA MASTERCARD AMERICAN EXPRESS DISCOVER

Credit Card # _____ Exp. Date _____

Name as it appears on card: _____ 3 or 4 Digit Security Code _____

Billing Address of card: _____ Apt./Suite# _____

City: _____ State: _____ Zip: _____

Authorized Signature (Cardholder or authorized agent): _____

Email Address _____ @ _____ Phone # _____

Billing will show on statement as NY Server LLC