DATE: [Date]

TO: [Process Server Name/Agency]
ADDRESS: [Process Server Address]
EMAIL/FAX: [Email or Fax Number]

RE: Letter of Instruction for Process of Service and Skip Trace

CASE NAME: [Plaintiff Name] v. [Defendant Name]
CASE NUMBER: [Court Case Number]
COURT: [Name of Court/County]

Dear Process Server,

Please find the enclosed legal documents to be served upon the individual/entity listed below:

DEFENDANT/WITNESS NAME: [Full Name]
LAST KNOWN ADDRESS: [Last Known Street Address, City, State, Zip]
LAST KNOWN PHONE: [Phone Number]
DOCUMENTS TO BE SERVED: [e.g., Summons, Complaint, Subpoena]

1. SKIP TRACE REQUEST
If the address provided above is no longer valid, you are hereby authorized to perform a **Skip Trace** to locate the subject's current residence or place of employment. Please notify our office of the new address and any associated fees before proceeding with service at the new location.

2. SERVICE INSTRUCTIONS
- Please effectuate [Personal Service / Substitute Service / Corporate Service].
- Identify the subject via [Description/ID/Photo if provided].
- Multiple attempts should be made at varying times of day.

3. PROOF OF SERVICE
Upon successful service, please provide a notarized Affidavit of Service. If service is unsuccessful after diligent effort, please provide a Declaration of Due Diligence detailing all attempts and the results of the skip trace.

4. BILLING
Please send all invoices and the completed proof of service to: [Your Name/Firm Name] at [Your Billing Address/Email].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Signature]
[Your Printed Name]
[Your Phone Number]