

Replica, LLC
8201 4th St., Downey, CA 90241
888-519-6026

ORDER DATE

Attorney's Name

Urgent Request (check here) ☐

Attention:

Billing Code:

Firm Name

Services Needed (check all that apply):

Address

Subpoena Preparation ☐

E-Mail for Approval ☐

City/Zip Code

Service of Process ☐

Copy Records ☐

Phone No.

Date of Discovery Cut-Off (if any) _____

Case Title

Vs.

Copy of Case Caption and Service List is Attached ☐

FACILITIES TO BE SERVED (add attachment if more than 4 locations)

Business Address ☐

Residence Address ☐

Business Address ☐

Residence Address ☐

1.

Name of Facility

Address

City

State

Zipcode

Phone Number and/or Email

2.

Name of Facility

Address

City

State

Zipcode

Phone Number and/or Email

Type of Records Needed (note that some facilities will require separate requests to be submitted to different departments)

Medical ☐

Billing ☐

X-rays ☐

Medical ☐

Billing ☐

X-rays ☐

Personnel ☐

Payroll ☐

Retirement ☐

Personnel ☐

Payroll ☐

Retirement ☐

Bank ☐

Loan ☐

Other ☐

Bank ☐

Loan ☐

Other ☐

Business Address ☐

Residence Address ☐

Business Address ☐

Residence Address ☐

3.

Name of Facility

Address

City

State

Zipcode

Phone Number and/or Email

4.

Name of Facility

Address

City

State

Zipcode

Phone Number and/or Email

Type of Records Needed (note that some facilities will require separate requests to be submitted to different departments)

Medical ☐

Billing ☐

X-rays ☐

Medical ☐

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X-rays ☐

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Payroll ☐

Retirement ☐

Personnel ☐

Payroll ☐

Retirement ☐

Bank ☐

Loan ☐

Other ☐

Bank ☐

Loan ☐

Other ☐

Records of (Complete Name):

Aka's

Date of Birth

Social Security No.