

## Copy Request and/or Record Search

NAME: \_\_\_\_\_

CAUSE NUMBER: \_\_\_\_\_  
(if no cause number provided, continue; otherwise skip to Request)

SEARCHED FOR CAUSE #    YES \_\_\_\_\_    NO \_\_\_\_\_

NAME(S) TO BE SEARCHED: \_\_\_\_\_

YEARS TO SEARCH \_\_\_\_\_

REQUEST COPIES OF: \_\_\_\_\_ #PGS \_\_\_\_\_

\_\_\_\_\_ #PGS \_\_\_\_\_

Notes: If you must scan the document to be emailed, you must charge \$1.00 per page.  
If you are emailing a document of 5 or more pages, the cost will only be \$5.00.  
If you are emailing a document of less than 5 pages, the cost is only \$1.00 per page.

CERTIFY THE DOCUMENT(S) YES \_\_\_\_\_    NO \_\_\_\_\_

**\*\*\*\*Certified copies-by mail or in person only\*\*\*\***

Add \$1.00 for each certification	# Pages	\$ _____
Add \$10.00 if requested to be faxed	Cert. Copy	\$ _____
If requested to be emailed, put fees here	Fax	\$ _____
Add \$5.00 if SEARCHED	Email	\$ _____
Add \$5.00 if Certificate of No Record prepared	Search	\$ _____
	Certificate	\$ _____
	<b>TOTAL</b>	<b>\$ _____</b>

How do you wish to pay?    Cash \_\_\_\_\_    Cashier's Check \_\_\_\_\_    Money Order \_\_\_\_\_

How do you wish to receive your documents?    Pick up \_\_\_\_\_

Mail to \_\_\_\_\_

Email to \_\_\_\_\_

Fax to \_\_\_\_\_

Call back number \_\_\_\_\_