

Marion County Circuit Court
REQUEST FOR COPIES

Date: _____

Requestor's Contact Information

Name: _____ Phone: _____

Full Address: _____

Email: _____

How would you like the document sent? MAIL
 EMAIL (non-certified & non-exemplified only)

Type of Case or Subject Matter of Documents Requested: _____

Approximate Date Case Was Filed: _____

Name(s) on the Case: _____

Case Number(s): _____

Document(s) you are Requesting:

Include the document title or any other identifying information, such as the date of the Judgment or Order.

_____	Number of Copies _____	Certified? <input type="checkbox"/>	Exemplified? <input type="checkbox"/>
_____	Number of Copies _____	Certified? <input type="checkbox"/>	Exemplified? <input type="checkbox"/>
_____	Number of Copies _____	Certified? <input type="checkbox"/>	Exemplified? <input type="checkbox"/>
_____	Number of Copies _____	Certified? <input type="checkbox"/>	Exemplified? <input type="checkbox"/>

Please check our website for copy costs (additional postage costs may apply).

<http://courts.oregon.gov/Marion/MaterialsAndResources/pages/records.aspx>

Payment by Check: please submit a check to cover the cost of copying, and certification or exemplification if requested. If you do not know the exact number of copies to be made, send a blank check payable to the "State of Oregon" and in the memo line, write "Not to Exceed" and an amount you believe will cover the cost of the copies, such as "Not to exceed \$25." Records staff will then fill in the exact amount and send a receipt to you along with your copies.

Payment by Credit Card: please fill out the information below,

* *We do not accept American Express.*

Credit Card Number _____ Expiration Date _____

CCV Code _____ Name on the Credit Card _____