### **7<sup>th</sup> Judicial District of the State of Oregon**

#### **COUNTY OF**

QUOTED COST: \$

Choose an item.

## **PUBLIC RECORDS REQUEST FORM**

Format/Delivery: Email Print Pick Up Mail Date of Request:

NOTE: Payment must be received in full before copies will be made/sent. For requests/quotes, please mail this form to the above address or by email to: Choose an item.

Requests will be acknowledged within 5 business days and may take up to 15 business days to process.

#### **Requestor's Contact Information:**

| Name:    |  |
|----------|--|
| Address: |  |
|          |  |
| Phone:   |  |
| Email:   |  |

#### File/Case Information:

| Names to Search:  | Date of Birth:                 | Date of Death: |  |  |  |  |  |
|---|--------------------------------|----------------|--|--|--|--|--|
|   |                                |                |  |  |  |  |  |
|   |                                |                |  |  |  |  |  |
|   |                                |                |  |  |  |  |  |
|   |                                |                |  |  |  |  |  |
| Case Numbers:   | Case Type and Year Case filed: |                |  |  |  |  |  |
|   |                                |                |  |  |  |  |  |
|   |                                |                |  |  |  |  |  |
| <b>Documents Requested</b> (include document title or any other identifying information such as |                                |                |  |  |  |  |  |
| date or description of what they contain so we can properly identify the documents you need):   |                                |                |  |  |  |  |  |
| General Judgment / Decree Starting or Charging Documents (Complaint, Indictment)                |                                |                |  |  |  |  |  |

**Case Summary** 

**Payment Options:** 

Regular Copies

Supplemental Judgments **Exemplified Copies** 

Certified Copies Entire Case file (all documents) OTHER documents or info, e.g., if only specific documents required Certified/Exemplified, indicate which. (Please describe other documents, approximate date document filed, etc.):

# Audio Recording of Hearing or Trial (include as much hearing information as known): CD Email

| Case # | Hrg Date | Court Room | Start Time | End Time | Event # |
|--------|----------|------------|------------|----------|---------|
|        |          |            |            |          |         |
|        |          |            |            |          |         |

Check or Money Order payable to: **State of Oregon** Cash Credit/Debit (payment can be taken by phone; no American Express) Costs: (If mailed, actual postage costs apply unless stamped, self-addressed envelope provided).

| Format of Records           | Per Printed Page   | Email Delivery                      |  |
|-----------------------------|--|-------------------------------------|--|
| Scanned File (PDF)          | \$0.25 per page + actual postage costs                     | No per page fee;<br>\$3.00 per case |  |
| Non-Scanned File            | \$0.25 per page + actual postage costs                     | \$0.20 per page                     |  |
| From Microfilm              | \$0.45 per page + actual postage costs                     | \$0.45 per page                     |  |
| Facsimile (send or receive) | \$2 for 1 <sup>st</sup> page; \$1 per each additional page | N/A                                 |  |
| Audio Recording             | On CD: \$10 per case + \$2 postage to mail                 | \$9 per case                        |  |
| Additional costs:           | \$5 per certified document; \$10 per exemplified document  |                                     |  |

**CLERK INITIALS:**