TO BE COMPLET	ED BY THE PA	RTY REQUESTIN	IG FILE:		
ORDER DATE:					
CASE NUMBER:					
CASE NAME:					
ORDERED BY:					
NAME:					
FIRM:					
ADDRES	SS:				
PHONE:					
It normally takes arrives in our office		-			rth. When it
Please be advised the date you are no to retain the file fo ************************************	otified that we r a longer period	have received the of time.	file. Please noti	fy our office if y	ou need us
TO BE COMPLET	ED BY DEPUT	Y CLERK			
\$70.00 PAID □Y	ES	□NO			
If yes,	receipt #)		Date Paid:		
Deputy Clerk Rece	iving Request				

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