

**REQUEST FOR FILE BEING MICROFILMED**  
(Attach to top of case file)

The file you have requested has been sent to the Micrographics Department to be filmed. Therefore, it will take a few days to fill your request. Please complete the following information to the best of your knowledge. Failure to give complete information may delay your request.

We will notify you when we get the file back from Micrographics. **Please bring your copy of this request with you when you return to look at the file.**

**DESCRIPTION OF FILE REQUESTED**

Date of Request: \_\_\_\_\_ Case No. \_\_\_\_\_

Location where case was filed: \_\_\_\_\_

Case Caption: \_\_\_\_\_ vs. \_\_\_\_\_

Documents needed from file:

\_\_\_\_\_  
\_\_\_\_\_

Comments:

\_\_\_\_\_  
\_\_\_\_\_

Your Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address (if no phone): \_\_\_\_\_

**FOR CLERKS USE ONLY**

<input type="checkbox"/> Copy to Requester  <input type="checkbox"/> Original to Supervisor  By: _____ Deputy Clerk	Supervisor's Approval:	Date Request Filled:
	Date Micrographics Notified:	Date File Returned to Mic.:
	By: _____	By: _____
	Date Party Notified:	Date File Received in Micrographics:
	By: _____ Deputy Clerk	By: _____
		BOX _____