## Chelan County Superior Court Clerk Public Court Records Request Form

Files of the superior court clerk are not subject to the Public Records Act because, with a few exceptions, such records are already public. This issue was decided in Nast v. Michaels, 107 Wn. 2d 300, 730 P. 2d 54 (1986). This office maintains computer terminals in the lobby for the public's use to view court clerk files. Alternatively, copies of documents from court clerk files may be purchased. RCW 36.18.016 specifies the fees for copies; paper copies are available for 50 cents per page, electronic copies (email) are available for 25 cents per page plus a \$4.00 convenience fee, and copies on a CD are available for \$20.00 for the CD plus 25 cents per page. Certified copies are \$5.00 for the first page and \$1.00 per page thereafter.

You can order these documents by calling our office; you may pay by credit card, or complete the form below and send a check or money order along with a self-addressed stamped envelope to: Chelan County Clerk, 350 Orondo, Suite 501, Wenatchee, WA 98801. You may also purchase the desired documents by going to the Washington State Archives website: <a href="https://www.digitalarchives.wa.gov/">https://www.digitalarchives.wa.gov/</a> or complete the form below.

\*Indicates required information; without it your request cannot be processed.

| Requestor's information:  |            |                            |                      |
|---|------------|----------------------------|----------------------|
| ame: Agency (if applicable)   |            | _                          |                      |
| *Telephone #:   | Fax #:     |                            | _                    |
| *Mailing Address:   |            | Apt #:                     | -                    |
| City:   | State:     | Zip:                       | -                    |
| E-mail Address:   |            |                            | -                    |
| Record/Document Information You are Requ  | uesting    |                            |                      |
| *Case Number (s)  |            |                            |                      |
| *Defendant/Party Name:  |            |                            |                      |
| * Defendant/Party Date of Birth:  |            |                            |                      |
| Documents Requested: (be specific)  |            |                            |                      |
|   |            |                            | -                    |
| Do you need CERTIFIED copies? Ye Please be advised there is a cost of \$5.00 for documents. |            | ) for each additional page | -<br>e for certified |
| Requested by:Signature  | Printed Na |                            | _                    |
|   |            |                            |                      |
| Internal Use Only: Date Requestor Advised   |            | Amount Due \$              |                      |