

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 \$0.50 cents per page, electronic copies (email) are available for \$0.25 cents per page, and copies on a CD are available for \$20.00 for the CD plus \$0.25 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 98807-3025. You may also purchase the desired documents by using the clerk e-pass website: <https://www.clerkepass.com/Chelan/> or by going to the Washington State Archives website: <https://www.digitalarchives.wa.gov/> or complete the form below.

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

Requestor's Information:

*Name: _____ Agency (if applicable) _____

*Telephone #: _____ Fax #: _____

*Mailing Address: _____ Apt #: _____

City: _____ State: _____ Zip: _____

E-mail Address: _____

Record/Document Information You are Requesting

*Case Number (s) _____

*Defendant/Party Name: _____

*Defendant/Party Date of Birth: _____

Documents Requested: (be specific)

Do you need CERTIFIED copies? Yes No

Please be advised there is a cost of \$5.00 for the first page and \$1.00 for each additional page for certified documents.

Request a copy of a recording of a court proceeding:

*Date of Court Proceeding _____ Time: _____ Case No. _____

Cost is \$25.00 per CD.

Requested by: _____
Signature Printed Name

Internal Use Only: Date Requestor Advised _____ Amount Due \$ _____