

FAX COVER SHEET
CHELAN COUNTY SUPERIOR COURT
MARTIN D. YOUNG, CHELAN COUNTY CLERK
509-667-6380

Fax to (509) 667-6611

Do Not Send the Originals

Cause Number:	Date:
Case Caption: vs	Phone Number: ()
Firm Name:	Person Filing/Contact:
Address:	City/State/Zip:

FEEES

Payment by credit card is available on line at www.chelanclerk.com or by calling 1-855-741-7780	
FAXING FEE: \$5.00 1st page + \$1.00 per page thereafter.	\$5.00 (1 st pg) + _____ pages @\$1.00 ea=_____
JUDGES WORKING COPIES : \$0.50 cents per page	_____ pages @ \$0.50 cents per page = _____
Select one: Judge- Jourdan Brandt Ferrera Comm. Brandt	Hearing Date:
ENTER OTHER FEES SUBMITTED:	Confirmation # if paying by Credit Card_____
TOTAL FEES SUBMITTED:	_____ Total pages faxed excluding this cover sheet

Fax filing is subject to the provisions of GR 17 and is available 24 hours per day, 7 days per week. **Do Not Send the Original**

FAX FEE: Payment by credit card is available on line at www.chelanclerk.com or by calling 1-855-741-7780. **If you are paying by credit card you must include your Fax Filing Confirmation Number above.** Read and sign the "FAX FEE REMITTANCE CERTIFICATION", below.

FILING FEE: Documents requiring filing fees may be faxed; these include, but are not limited to, original petitions or complaints, jury demands, writs, notices of appeal, and petitions to modify child support. Payment must be made prior to fax filing.

FAX FEE REMITTANCE CERTIFICATION: I am mailing my check/money order today, payable to "Chelan County Clerk," Chelan County Superior Court Clerk, 350 Orondo, Suite 501, Wenatchee WA 98801, or I have paid by credit card and have included my confirmation number above for \$_____ representing the FAX fee for _____ pages of the accompanying document, plus any fees for working copies, filing or ex-parte fees.

A copy of this Cover Sheet must accompany the mailed fee so that we may credit you correctly.

Signature: _____