

Court Document Copy Request		Request Date
Part A: Requesting Party		
Name	Phone	
Address	City, State, Zip	
<input type="checkbox"/> Select if a Government Agency		
Part B: Case Information		
Select Case Type <input type="checkbox"/> Civil <input type="checkbox"/> Conciliation <input type="checkbox"/> Probate/Mental Health <input type="checkbox"/> Criminal <input type="checkbox"/> Family <input type="checkbox"/> Juvenile	Court File Number <i>(if known)</i> <hr/> Case Date Range From: _____ To: _____	
Party Name(s) Plaintiff / Petitioner _____ Defendant/Respondent / Judgment Debtor _____ Defendant's Date of Birth* _____ <small>* In Criminal cases, you must include the Defendant's date of birth or case number(s).</small>		
Part C: Document(s) & Type of Copy		
Check the box below for the document you want. If you do not know the document title or it is not listed here, please describe it in "Other" below. Attach more pages as needed.		
# of Copies: _____ Plain or Certified: _____		
Document Name(s): _____ _____ _____		
Part D: Fees & Delivery Options		
Copy Fees \$10 per document – plain copy \$16 per document – certified copy Other: _____	Delivery Options <input type="checkbox"/> U.S. Mail <input type="checkbox"/> Pick up in Lake County (Two Harbors) <input type="checkbox"/> Email <i>(for government agencies only)</i>	
Total Fees Enclosed: _____ Make check or money order payable to "Court Administrator." Payment is required before request will be processed.		
Send completed Request Form and payment to: Lake County Court Administration Attn: 6th District Central Copy 601 3 rd Ave. Two Harbors, MN 55616	Questions? Call: (218) 834-8330 or 1-800-450-8832, ext. 330	