

## RECORD SEARCH REQUEST FORM (please print legibly \* incomplete forms will delay your request \* please fill out form completely)

## FEE: \$2.00 per year per name up to 7 years, \$1.00 per year per name thereafter (requests can be mailed, faxed or emailed)

Last Name:		
First Name:		
Case type(s):		
Years you would like searched:		
Requested by:		
Phone & fax numbers:		
Email:		
Address:	City/Town:	Zip Code:
Total amount enclosed: \$		
CC#	Exp date:	CVV#:
Please email, fax or mail <b>request form</b>	n & payment to:	
	Carly Jay Anderson Clerk of District Court Beaverhead County 2 S. Pacific St., #5 Dillon, MT 59725	

406-683-3728 (fax) clerkofcourt.beaverhead@mt.gov

406-683-3725

If not paying with a credit card, please include a scanned copy of payment if submitting form by email or fax. Please send payment in mail immediately following request. (money order or cashier's check can be mailed with form, no personal checks will be accepted)