

**67<sup>th</sup> DISTRICT COURT RECORD/COPY REQUEST**

1. Date of Request: \_\_\_\_\_
2. Requested by: \_\_\_\_\_  
Name  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
Home telephone no. \_\_\_\_\_ Business telephone no. \_\_\_\_\_

3. Specify the complete case number and/or party name(s):
- Case Number: \_\_\_\_\_
- Party Name(s): \_\_\_\_\_ v \_\_\_\_\_

4. Nature of Request:
- Review Record. (Specify the type of record, such as case file, recording, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

Obtain Copies.

5. If copies are requested, list type of record to be copied:
- Complete case file (except for any nonpublic court records).
- Specific court record. (List documents, recordings, etc. Use an additional page if necessary.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:** Michigan law does not require that you place your name and address on this form. This information is requested to facilitate the processing of your request.

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For Court Use Only

\_\_\_\_\_ copies x per record/page charge of \$ \_\_\_\_\_  
Total charged: \$ \_\_\_\_\_

Processed by: \_\_\_\_\_ Date \_\_\_\_\_  
Court Clerk