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TO BE COMPLETED BY THE CUSTOMER (PLEASE PRINT):

CAUSE NUMBER: _____

STYLE: _____ **VS.** _____

(Note: for copies of Divorce Name at the time of the Divorce)

YEAR DIVORCE FILED WHAT YEAR _____

SPECIFY: CERTIFIED or UNCERTIFIED

PICK UP or MAIL cost of postage must be included in your payment

NEED COPY OF (PLEASE CHECK):

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CUSTOMER'S NAME (Please Print): _____

ATTORNEY'S BAR NO. _____ **LAW FIRM'S I.D. NO:** _____

ADDRESS: _____

PHONE NUMBER: (____) _____ **CELLULAR PHONE:** (____) _____

Indicate Form of Payment:

CASH: _____
Amount Given To Clerk

MONEY ORDER/CASHIER'S CHECK Type: _____ **Number:** _____

NOTICE:

1. Advance payment of copies is required prior to copies being made.
2. Orders over hundred pages might require more than 24 hours to complete.
3. There is a \$5.00 search fee when the cause number is not provided.

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CHRIS DANIEL, HARRIS COUNTY DISTRICT CLERK
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FOR DISTRICT CLERK'S USE ONLY

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SPECIAL INSTRUCTIONS: _____