UNITED STATES DISTRICT COURT
DISTRICT OF MARYLAND
OFFICE OF THE CLERK

Catherine M. Stavlas, Clerk of Court
David E. Ciambruschini, Chief Deputy

COPY WORK REQUEST
All Requests Must Be Made In Writing

Please fill out completely.

Requestor/Contact Person:	
Street Address:	
City, State, Zip:	
Phone No.:	
Case No:	Case Name:
Case Type: ☐ Civil ☐ Criminal ☐ Miscellaneous	

Please list each document you want copied.

Document Number	Date Filed	Document Title

Please check any special services needed.

☐ Certified Copies ☐ Exemplified (triple sealed) Copies

To be completed by court staff.

Estimated Cost: $_____	Receipt No.: $_____

Copies will be made within seven (7) days from the date of the request or date the file is received from archives. Payment is due at the time the request is made. Payment may be by check or credit card. Once the copies have been made you will be notified that they may be picked up. Copies must be picked up within seven (7) days from the date you are notified that they are ready. The Court cannot fax or email copies to you.