

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

**Request for Copies of Documents**

Your name: \_\_\_\_\_

Your inmate number: \_\_\_\_\_

Your institution & address: \_\_\_\_\_

Case name: \_\_\_\_\_

Case number: \_\_\_\_\_

<b>Describe the documents you are seeking.</b> Please be specific!	<i>For court use only</i>

Sign below to indicate you agree to pay the cost of **\$0.50** per page for these documents as well as a **\$70.00** retrieval fee if the documents are in storage.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Mail this form to:**

Clerk of the United States District Court for the Northern District of California  
450 Golden Gate Avenue, Box 36060, San Francisco, California 94102.

**What happens next?**

- (1) The court will mail this form back to you with the cost for the documents you seek below.
- (2) Get a check or money order in this amount: \$\_\_\_\_\_.
- (3) Mail your check or money order with this form to the Court.
- (4) The Court will mail the documents to you.