

**UNITED STATES DISTRICT COURT | NORTHERN DISTRICT OF ILLINOIS**

Office of the Clerk of Court | Thomas G. Bruton, Clerk of Court

Email request to: CCD_ILND@ilnd.uscourts.gov**Customer Information:** Name: _____

Email Address: _____ Telephone Number: _____

(Required for online payment)

Case Number (If applicable): _____

Payment Options: Paying by credit card is the fastest way to have your request processed. The Court will **invoice** you and send a secure Pay.gov link for quick online payment. You may also pay by check or in-person, but these options may take longer.

Select Payment Option: ☐ Credit Card☐ Payment by Check, made payable to Clerk, U.S. District Court,
sent in the mail to: 219 S. Dearborn St., 20th Floor, Chicago, IL 60604☐ In-Person

*Request Number (Entered by Deputy Clerk): _____

Request Type	Cost Per Item	Quantity	Sub Total
Photocopies (per page) Document Number(s): _____ _____			
Name Change Petition Name: _____ Date of Ceremony: _____			
Certified Copy of Name Change Petition Name: _____ Date of Ceremony: _____			
Certification of Documents Document Number(s): _____ _____			
Letters Rogatory or Letter of Request			
Exemplification of Documents Document Number(s): _____ _____			
Apostille Document Number(s): _____ _____			
Certificate of Good Standing			

Certificate of Admission			
Recording Production (Digital Media Exhibits) Docket No(s): _____ _____			
Certificate Search/Audio Recording (Reproducing Recording of Court Proceeding) Name or Hearing: _____ Date Range from _____ to and including _____ ☐ Civil ☐ Criminal ☐ Civil and Criminal			
Certification of Judgment (AO 451)			
Retrieval of Case File/Docket Sheet – 1 st box			
Retrieval of Case File/Docket Sheet – additional box			
Federal Record Center SmartScan – non-certified copies only. Fee per page \$0.65			
Civil Filing Fee			
Habeas Filing Fee			
Miscellaneous Filing Fee/Registration of Foreign Judgment			
U.S. Court of Appeals Docketing Fee and Notice of Appeal			
Misdemeanor Appeal (Magistrate Judge to District Judge)			

Total Amount Owed for Items Requested:
