

**WOOD COUNTY DISTRICT CLERK
RECORD REQUEST FORM**

100 S. Main St.
Quitman, TX 75783
Phone: 903-763-2361

www.mywoodcounty.com

PO BOX 1707
Quitman, TX 75783
FAX: 903-763-1511

EMAIL REQUEST TO: district.clerk@mywoodcounty.com

Requestor:	Date:
Email:	Phone:
Address:	Fax:
City, State, Zip Code:	

Complete below **(please be specific)** or print out a case summary from the Wood County Judicial Records Search website located at <https://portal-txwood.tylertech.cloud/PublicAccess/default.aspx> documents and mark the requested documents and fax with this form.

******* Cases filed since 2016 are located on the Judicial Records Search website. *******

Please allow up to 10 business days for your request to be completed.

Case/Cause #: _____

Party Name: _____

☐ Certified Paper Copy

☐ Plain Paper Copy

☐ Plain Electronic Copy

Quantity of Each
Document: _____

Document Title

Date Document Filed

File Date: _____

File Date: _____

File Date: _____

File Date: _____

- **Certified Copies** are \$5.00 for each certification and \$1.00 per page. **Plain paper copy** is \$1.00 per page. **Plain Electronic Copies** are \$1.00 per document for documents 1-10 pages in length with \$1.00 minimum and for those documents 11 pages or greater in length at the rate of \$0.10 per page. A plain copy of a document is a non-certified copy of a document.
- **Plain electronic copies** can be emailed or faxed to the information provided above. **Certified copies** will be mailed regular USPS First Class mail. **If requester prefers a different delivery method, please include separate envelope with pre-paid shipping label with request.** Copies will not be mailed to a third-party.
- **Clerk's Certificate** will be provided with the purchase of a certified copy of the entire case file for \$5.00 for certification and \$1.00 per page.
- **Certified Exemplified copy** of a document is \$5.00 for certification and \$1.00 per page per document.
- Documents sealed by order or statute will not be provided unless permitted by law. Payment can be made by cash, money order, or credit card (American Express, MasterCard, Visa and Discover). Credit card charges are subject to a **2.25%** transaction fee of the total amount charged (**\$1.00 minimum transaction**). This office will not reimburse fees and is not responsible for fees associated with duplicate submissions.

THIS FORM MUST BE COMPLETED IN ITS ENTIRETY. NOT COMPLETING THE FORM PROPERLY COULD KEEP YOUR REQUEST FROM BEING PROCESSED IN A TIMELY MANNER. YOU WILL NOT BE INFORMED THE AMOUNT OF YOUR COPY REQUEST IN ADVANCE.

Payment method:	☐ Money Order	☐ MasterCard	☐ Visa	☐ Discover	☐ American Express
Name on credit card:	Credit/Debit Card No.:				
Amount Authorized Not to Exceed	☐ \$25.00	☐ \$35.00	☐ \$50.00	☐ Other \$	
Billing Address Zip Code:	Exp. Date:		MM/YY	3 – digit Security Code:	
Printed & Signed Name of Authorized Person:					