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Case Number: _____

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Name(s) of Party/Parties: _____

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*Note: If requesting by mail, please include a self-addressed stamped envelope and payment (**it is not advisable to include cash**).*

If requesting by mail, please send to:

Prothonotary
Montgomery County Courthouse
P.O. Box 311
Norristown, PA 19404-0311

Questions? Please call 610-278-3360.