# NATIONAL ARCHIVES AND RECORDS ADMINISTRATION (NARA) ORDER FOR COPIES OF COURT OF APPEALS CASES

## Copy Packages Available

Entire Case File: Includes all documents in a case file.

Docket Sheet: A list of documents filed in a Court of Appeals Case; an outline of the case.

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If you **do not** want the **Entire Case File copied**, please make an appointment to review the file at our facility to select the documents needed, or you may contact the court where the case was closed or filed to make arrangements to review the case at the court location.

**To make an appointment** *to review the file, call us at* 301-778-1520, Monday–Friday (excluding Federal holidays), 8:00 a.m. to 4:30 p.m. Appointments should be made 24 hours in advance.

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Questions? Concerns? Contact our Research Room staff at the number shown above or visit us at www.archives.gov.

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#### National Archives Trust Fund Board NATF Form 93 (10-2007) NATIONAL ARCHIVES AND RECORDS ADMINISTRATION ORDER FOR COPIES OF **COURT OF APPEALS CASES** 1. LOCATION 2. AREAS SERVED Washington National Records Center District of Columbia 4205 Suitland Road, Suitland, MD 20746-8001 Fax: (301) 778-1534 3. SELECT COPY PACKAGE (Select only one) Copy Package Not Certified Copy Package Certified (Certification for fax copies is not available) ☐ Entire Case File — **\$70.00** (150 page maximum) ☐ Entire Case File Certified — \$85.00 ☐ Docket Sheet — **\$25.00** ☐ Docket Sheet — **\$40.00** 4. CASE INFORMATION (obtain from the court in which the case was filed) COURT LOCATION (city & state) CASE NAME(S) CASE NUMBER TRANSFER NUMBER **BOX NUMBER** LOCATION NUMBER 5. DELIVERY METHOD (select only one) ☐ FedEx (additional \$25.00) ☐ Charge Fed Ex Account -# ☐ Fax - 25 page limit □ Mail **6. YOUR DELIVERY INFORMATION MAIL COPIES TO: FAX COPIES TO:** NAME FAX NUMBER ADDRESS APT. # / SUITE # CITY ATTENTION STATE AND ZIP DAYTIME TELEPHONE NUMBER DAYTIME TELEPHONE NUMBER 7. YOUR PAYMENT INFORMATION **Credit Card** Check or Money Order **CARD TYPE** Make your check or money order □ VISA ☐ American Express ☐ Discover ☐ MasterCard payable to: ACCOUNT NUMBER EXPIRATION DATE **National Archives** Trust Fund (NATF) NAME ON CARD Mail your request with payment to the address shown in block 1 at the SIGNATURE or THREE DIGIT SECURITY CODE (on back of charge card). Order can not be processed if top of this page. one of these two items is not provided. NARA USE ONLY SEARCHER DATE PAYMENT:

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REMARKS