



SACRAMENTO COUNTY CLERK/RECORDER OFFICIAL RECORDS COPY REQUEST

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Please type or print legibly. Name, address, and phone number information is required for all copy orders.

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Requester's Information

Requester's Name

Telephone Number

Residential Address: Number and Street, City, State Zip code

Shipping Address including City, State and Zip code (if different from above)

Payment and Delivery Method (Make checks payable to Sacramento County Clerk/Recorder)

Credit card (+ \$6.00)

Overnight delivery for additional \$19.00

Credit card (+ \$6.00)

Regular mail delivery

Check/money order enclosed

Regular mail delivery

Cardholder's Name

Card Number

CVC (3-digit code)

Expiration Date

Return completed form with payment:

Mail: Sacramento County Clerk/Recorder
P.O. Box 839
Sacramento, CA 95812-0839

Fax: (916) 874-0947
Tel: (916) 874-6334

Email: sacrec@sacounty.net

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