

REQUEST FOR REIMBURSEMENT OF FINDERS CHECK

Court Name _____
Court Address _____
City, State, Zip _____
Phone Number _____
Fax Number _____

Requesting party: _____

Address: _____

Phone: () - _____

☐ I am requesting reimbursement of my finders check.

☐ I am requesting reimbursement of half of my spouse's finders check because we filed jointly.

Signature: _____

Date: _____

XX

FOR COURT USE ONLY: Request received: _____ (date)

Check # _____ Amount: _____ Issue Date: _____ Case # _____

The individual on the above case does not owe any money as of today.

_____ (date) Verified by: _____

☐ Proof of identification shown and verified by: _____

☐ Proof of joint tax return shown (if applicable) and verified by: _____

☐ Order from Judge/Commissioner ordering return of finders check _____ (date of order)

Finders check returned ☐ in person ☐ by mail on _____ (date) by _____ (clerk initials)