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REQUEST FOR COUNTY RECORDER

RUSH

ROUTINE

Today's Date:

Your Reference / File #:

Date Required:

CLIENT INFORMATION:

Client / Company Name:

Contact Name:

Address:

City:

State:

Zip Code:

Telephone #:

Email:

DESTINATION INFORMATION:

County Recorder Destination:

Address:

City:

State:

Zip Code:

RECORDING / COPYING INSTRUCTIONS:

RECORD DOCUMENT(S)

COPY RECORDED DOCUMENT(S)

Comments / Additional Instructions: