

**PHOTO COPY REQUEST OF MORE THAN 20 PAGES**

TO: CLERK, UNITED STATES DISTRICT COURT  
DISTRICT OF HAWAII  
300 Ala Moana Blvd. Room C-338  
Honolulu, Hawaii 96850  
Ph. (808) 541-1300  
Fax. (808) 541-1303

I request to have the file(s)/document(s) designated below to be sent to a professional copy service designated by the Clerk, United States District Court. I will not hold the U.S. District Court Clerk's Office responsible for any documents that I have not designated below nor for any photocopy charges that I incur. I understand that I will be billed directly by the professional copy service at my address and phone number below and that I am responsible for payment to them.

\_\_\_\_\_  
Signature Date

Name (Print) \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Case Number \_\_\_\_\_

Case Title \_\_\_\_\_

File Number(s) \_\_\_\_\_

I request the following document number(s) or description photocopied:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To follow up on your order and to make arrangement for payment please contact:

Professional Image  
1600 Kapiolani Blvd., Suite 120  
Honolulu, HI 96814  
Ph. (808) 973-4477

For Court use only.	(To be returned to the Clerk's Office U.S. District Court within 48 hours)	
Requested by:	_____	_____
	Clerk's Office, U.S. District Court	Date/Time
Received by:	_____	_____