



**Doug Chorvat, Jr.**

Clerk of Circuit Court & Comptroller - Hernando County

20 N. Main Street RM 165, Brooksville, FL 34601 / TEL (352) 754-4201

Date: _____	Request ID: _____
Name: _____	Phone: _____
Preferred Method to Receive Records	
Note: Requests for certified or exemplified copies of documents can only be fulfilled using pickup or mail methods	
Address to mail copies:	
City: _____	State: _____ Zip Code: _____
E-Mail Copies To: _____	

**Court Records Copy Request – One Case per Request**

**Statutory Fees**

Copy Of Court Documents	\$1.00 per page
Certification	\$2.00 * <i>In addition to the copy fee listed above</i>
Exemplification	\$7.00
Postage	Actual Cost * <i>if applicable</i>
Credit Card Convenience Fee	3.5% per order * <i>non-refundable</i>
Child Support Lien Payoff Statement	\$25.00
Clemency	No Charge * <i>with proof of application</i>

**Non-Child Support Related Requests**

If you know the case number, please enter it here.					
If you don't know the case number, please search for at <a href="https://hernandoclerk.com/">https://hernandoclerk.com/</a> and select Court Cases.					
Case Style or Parties:					
Please be specific with your request to narrow our search and respond to you quickly and efficiently					
Entire Case:	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
Name of Document:	<input style="width:150px;" type="text"/>	Approx Date of Filing	<input style="width:50px;" type="text"/>	Docket ID	<input style="width:50px;" type="text"/>
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**Child Support Lien Payoff \$ 25.00**

If you know the case number, please enter it here.	
If you don't know the case number, please search for at <a href="https://hernandoclerk.com/">https://hernandoclerk.com/</a> and select Court Cases.	
Case Style or Parties:	

**Child Support Payment History**

If you know the case number, please enter it here.			
If you don't know the case number, please search for at <a href="https://hernandoclerk.com/">https://hernandoclerk.com/</a> and select Court Cases.			
Case Style or Parties:			
<input type="checkbox"/> Payments	<input type="checkbox"/> Assessments	<input type="checkbox"/> Both	
<input type="checkbox"/> History Span	<input type="checkbox"/> Full History	<input type="checkbox"/> Partial History	

Please return this form to our Customer Service Clerk, mail it to the address above or email it to [copyrequests@hernandoclerk.org](mailto:copyrequests@hernandoclerk.org)

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