

**INMATE'S REQUEST FOR DISBURSEMENT OF LEGAL COSTS**

I, \_\_\_\_\_, \_\_\_\_\_, request the following for the purpose of securing legal redress per OP-030115:  
(Print Name) (DOC Number)

\_\_\_\_\_ copies of the attached document,  Legal Documents  Legal Resource Center

(Description)

\_\_\_\_\_ copies of each of the \_\_\_\_\_ originals.

Total copies requested \_\_\_\_\_ x 25¢ each page: \_\_\_\_\_

\_\_\_\_\_ #10 plain white envelope(s), no return address, at 5¢ each \_\_\_\_\_

\_\_\_\_\_ Manila envelope(s), at 10¢ each \_\_\_\_\_

\_\_\_\_\_ First class postage \_\_\_\_\_

\_\_\_\_\_ Certified services to document initial filing in court \_\_\_\_\_

\_\_\_\_\_ Plain paper or blank forms (8 1/2 X 11 only), at 5¢ each \_\_\_\_\_

\_\_\_\_\_ Printing from computers at 25¢ per page \_\_\_\_\_

\_\_\_\_\_ Notary service, at \$1.00 per notarization \_\_\_\_\_

**DISBURSEMENT TOTAL - \$ \_\_\_\_\_**

I understand that in accordance with OP-030115, I will be charged for the above amounts and that this is also a request for disbursement of funds from my trust fund draw account. If I do not have enough funds to cover these costs related to court-imposed or rule-imposed deadlines, the amount will be collected as soon as funds become available.

\_\_\_\_\_  
Inmate's Signature/Date/Time Law Library Supervisor's Signature/Date/Time

\*\*\*\*\*

Date the requested services/items were provided: \_\_\_\_\_

Date the requested services/times were rejected and, if applicable, material returned to the requesting inmate. If rejected, state why for each service/item: \_\_\_\_\_

\_\_\_\_\_  
Law Library Supervisor Signature Date/Time

\*\*\*\*\*

Trust Fund Officer: \$\_\_\_\_\_ Withdrawn from trust fund draw account

\$\_\_\_\_\_ Balance due, to be collected as soon as funds become available in trust fund draw account (account debited)

\_\_\_\_\_  
Signature of Trust Fund Officer Date/Time

Original: Trust Fund Officer  
1st Copy: Inmate  
2nd Copy: Law Library Files