

# United States Court of Federal Claims

## Request for Copies of Case Records

Requestor's Name:

Telephone:

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Case Number:

Case Name:

Requested Documents:

Requestor's Address:

Signature of Requestor:

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Submit completed form via email to [CFC\\_RecordsRequest@cfc.uscourts.gov](mailto:CFC_RecordsRequest@cfc.uscourts.gov), or by mail to:

U.S. Court of Federal Claims  
Office of the Clerk  
717 Madison Place, NW  
Washington, DC 20439

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Date Received: \_\_\_\_\_

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Date Processed: \_\_\_\_\_ Processed By: \_\_\_\_\_