

**SUPERIOR COURT OF CALIFORNIA
COUNTY OF ORANGE
ORDER FORM FOR NAME INDEXES ON COMPACT DISK**

Operational Area	CD TYPE		Amount
	Monthly	Legacy	
Criminal/Traffic	<input type="checkbox"/> \$50.00 (No. of prepaid months_____)	<input type="checkbox"/> \$50.00 Legacy year(s)_____	\$
Civil/ Small Claims	<input type="checkbox"/> \$50.00 (No. of prepaid months_____)	<input type="checkbox"/> \$50.00 Legacy year(s)_____	\$
Family Law	<input type="checkbox"/> \$50.00 (No. of prepaid months_____)	<input type="checkbox"/> \$50.00 Legacy year(s)_____	\$
Probate	<input type="checkbox"/> \$50.00 (No. of prepaid months_____)	<input type="checkbox"/> \$50.00 Legacy year(s)_____	\$
Small Claims Legacy (pre-2006)		<input type="checkbox"/> \$50.00 Legacy year(s)_____	\$
Civil Limited Legacy (pre-2006)		<input type="checkbox"/> \$50.00 Legacy year(s)_____	\$
		Total →	\$

Information about Data on Compact Disks

Monthly CD: The file for the current month is generated on or about the 15th day of the following month and is cumulative for the year. For example, a file generated on July 15, 2008, will contain data for the period January 1, 2008 through June 30, 2008. **If you are interested in a specific month, please specify the month that you are requesting here:**

Legacy CD: The legacy CD contains all index data for each operational area from the last generated monthly index, back to the earliest index data residing in the data base.

How To Order

1. Select from the CD packages available on this order form by completing the appropriate box(es).

NOTE: If you wish to prepay for future Monthly CD's, please show the number of months you wish to receive in the space provided on the form, multiply that number by \$50.00, and show

the total in the amount column, above. You may only prepay through December of the current year.

2. Total your order form.
3. Make your check payable to: **Clerk of the Court**
4. Mail this order form and your check to:

Orange County Superior Court
Records & Exhibits Management
P. O. Box 1994
Santa Ana, Ca. 92702-1994

5. Include your complete return mailing address:

Name _____

Address _____

City _____ State/Province _____

Country _____ Postal Code/ Zip Code _____

Telephone _____ Contact Person _____

See our website at <http://www.occourts.org/media/pdf/cdindexesnotice.pdf> for more information.