Prescribed by State Board of Accounts   County Form No. 138 (1957)

Date of Request _____, 19 ____   Identification No. 00000

Record _____   TO: _____ (Title of Officer) _____

No. _____Page _____   You are hereby requested to prepare or
                                   proof and certify ____ (copy) (copies) of:

_____ Pages @ 35¢ $_____   _____

Certificate Fees   _____   _____

    TOTAL FEE $_____   _____
                                             (Signature of Requester)
Prepared _____, 19 ____   Will Call for on _____, 19 ____

Fee Paid _____, 19 ____   Mail to _____

Receipt Number _____   Address _____