



SUPREME COURT OF GUAM
Kotten Mås Takheló Guåhan

REQUEST FOR CERTIFICATE OF GOOD STANDING

FULL NAME:
OTHER NAMES ALSO KNOW AS:
DATE OF ADMISSION TO THE GUAM BAR:
DATE OF BIRTH:
CURRENT MAILING ADDRESS:
CURRENT PHONE NUMBER:
INSTRUCTIONS:
(details as to where and/or how certificate should be forwarded)

	Quantity	Amount	Total
First Certificate	<u> 1 </u>	@ \$25.00	\$25.00
Additional Original Certificates	<u> </u>	@ \$5.00	\$ <u> </u>
Total Requested:	<u> </u>	Total Amount Enclosed:	\$ <u> </u>

	Quantity	Amount	Total
Expedited (same day or next day)			
	Quantity	Amount	Total
First Certificate	<u> 1 </u>	@ \$50.00	\$50.00
Additional Original Certificates	<u> </u>	@ \$5.00	\$ <u> </u>
Total Requested:	<u> </u>	Total Amount Enclosed:	\$ <u> </u>

Please make check payable to the Supreme Court of Guam and send to the following address:

Supreme Court of Guam
Board of Law Examiners
Suite 300, Guam Judicial Center
120 W. O'Brien Drive
Hagåtña, Guam 96910

SIGNATURE

DATE