

SUPREME COURT OF GUAM Kotten Mås Takheló Guåhan

REQUEST FOR CERTIFICATE OF GOOD STANDING

FULL NAME:			
OTHER NAMES ALSO K	NOW AS	S:	
DATE OF ADMISSION T	O THE (GUAM BAR:	
DATE OF BIRTH:			
CURRENT MAILING AI	DDRESS:		
CURRENT PHONE NUM	IBER:		
INSTRUCTIONS:			
(details as to where and/or how certificate show	uld be forwarded	l)	
	Quantity	Amount	Total
First Certificate	1	@ \$25.00	\$25.00
Additional Original Certificates		@ \$5.00	\$
Total Requested:		Total Amount Enclosed:	\$
	Expe	edited	
	_	or next day)	
	Quantity	Amount	Total
First Certificate	1	@ \$50.00	\$50.00
Additional Original Certificates		@ \$5.00	\$
Total Requested:		Total Amount Enclosed:	\$
Please make check payable to the address:	•		following
	eme Court of l of Law Ex		
Suite 3	300, Guam .	Judicial Center	
	7. O'Brien I tña, Guam 9		
Hagat	ana, Guain A	· • · · · · · · · · · · · · · · · · · ·	
SIGNATURE			DATE