

Court E-Filing Request Form

Organization Name: _____

Nebraska.gov Account Number: _____ OR Nebraska.gov user name: _____

Contact Person: _____ Email Address: _____

Phone: _____ Fax: _____ Date: _____

Users <input type="checkbox"/>	Lawyer Names <input type="checkbox"/>	Bar # <input type="checkbox"/>	Current <input type="checkbox"/> Username (if known)
1 <input type="checkbox"/>			
2 <input type="checkbox"/>			
3 <input type="checkbox"/>			
4 <input type="checkbox"/>			
5 <input type="checkbox"/>			
6 <input type="checkbox"/>			
7 <input type="checkbox"/>			
8 <input type="checkbox"/>			
9 <input type="checkbox"/>			
10 <input type="checkbox"/>			

*For each additional set of ten users another \$50.00 annual subscription fee will be charged.

Direct Debit (ACH) - required payment type for e-Filing

*The ACH billing will override any current billing method for the account.

Bank Name: _____

Account Number: _____ Routing Number: _____

*Fax form to Nebraska.gov at 402.471.7817