

**IN THE MAGISTRATE COURT OF CHATHAM COUNTY
STATE OF GEORGIA**

)	
)	
)	
Plaintiff(s),)	
)	
vs)	Case No.: _____
)	
)	
)	
)	
Defendant(s).)	

REQUEST FOR CERTIFICATE OF PAYMENT OF COSTS

The undersigned requests the Magistrate Court of Chatham County to provide a Certificate of Payment of Costs in the above-referenced action. The name of the reviewing court is _____ and the case number is _____.

This _____ day of _____, 20_____.

Signature

Printed Name