

# LINX Subscription Account Setup Attorney/Staff

Please fill out this form and bring, mail or messenger it to the Pierce County Clerk's Office at 930 Tacoma Ave S Room #110 Tacoma, WA 98402

Account Type \_\_\_\_\_  
(Staff\*, Attorney or Government)

\*Please use this top portion to list your attorneys' information.

Subscriber Name \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

WSBA/Driver's License Number \_\_\_\_\_

Case Number (if applicable) \_\_\_\_\_

## Staff Information

**Attorney** shall be responsible for all activities of users who electronically file and serve at his or her direction or who obtain access through use of the subscriber's site.

1. Name	Driver's License Number
<input type="checkbox"/> I want this person to receive copies of my emails from LINX.	E-mail Address
2. Name	Driver's License Number
<input type="checkbox"/> I want this person to receive copies of my emails from LINX.	E-mail Address
3. Name	Driver's License Number
<input type="checkbox"/> I want this person to receive copies of my emails from LINX.	E-mail Address

I agree to the terms of the 'LINX Subscription Agreement'.

Date \_\_\_\_\_

Signed \_\_\_\_\_