

**Amsterdam Town Court**

283 Mannys Corners Road  
Amsterdam NY 12010  
Phone (518) 842-7411 Fax (518) 860-2165

Request for a Certificate of Disposition

**PLEASE PRINT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_

Charges: \_\_\_\_\_

Docket Number: \_\_\_\_\_

Any other names used: \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*There is a \$5 fee for each certificate of disposition requested. This can be paid by cash or credit card (Mastercard or Visa) in person, or a money order/certified bank check payable to the Town of Amsterdam Court. Personal checks are NOT accepted.

\*\*All credit card payments are subject to 2.99% credit card fee