Maryland State Archives

Please use a separate form for each request.

Requestor Information

Today's Date Select Today's Date

Name Enter Requestor's Name

Agency Enter Requestor's Agency

Address Where should we ship it to?

Phone Number Enter Requestor's Phone Number

Email Enter Requestor's Email

File/Record Information

Agency/Court Enter Agency/Court

Record Series and Number Enter Record Series and Number (Example: Mechanics Lien Record – T3351)

Box Number Enter Box Number Date/Year of File Enter Date/Year of File

Case/File Number Enter Case/File Number

Location Enter Location (Example: OR-3-2-32 or HF/11/15/34)

Will you be returning the file/record to the Maryland State Archives? Select yes or no

If no, please explain why Explain why you will not be returning the file/record to MSA?

Anything Else We Should Know About This Request?

Anything else we should know about this request?

E-mail or Mail this form to:

Helpdesk Number: 410-260-6487 **Email:** msa.helpdesk@maryland.gov

Mailing Address: Maryland State Archives, Attn: Sheila Simms, 350 Rowe Boulevard, Annapolis, MD 21401