SPOKANE MUNICIPAL COURT
Request for eCourt Portal Login Permissions – Defendants

Personal Information:

Last Name | First Name | Middle Name

Date of Birth

Contact Information:

Mailing/Email Address:

Street/PO Box No. | City | State | Zip -

Email Address | Phone Number

SPOKANE MUNICIPAL COURT INTERNAL USE ONLY BELOW THIS BOX

Approved | Disapproved:

Reviewing Official | Date