



KIMBERLY A. ALLEN
GRANT COUNTY CLERK
 and Clerk of the Superior Court

Cheryl L. Hill-Roberson, Chief Deputy Clerk

Grant County Clerk's Office
Odyssey Portal **MODIFY Master Registration***

Firm/Agency:		
Head of Agency/Firm Name:		Bar No.
Mailing Address:		
City:	State:	Zip Code:
Contact Phone Number:		
Email:		

ADD the following staff within my agency/firm allowed to access and view public cases:
 All staff should be linked to an attorney's bar number (if applicable). This will allow staff to view confidential items of the attorney of record. Each user must have a unique email address.

Name	Unique Email Address	Phone No.	Bar No.

REMOVE the following staff within my agency/firm allowed to access and view public cases:

Name	Unique Email Address	Phone No.	Bar No.

*I understand that user ID's and passwords shall not be shared and that I will **notify the Grant County Clerk within five (5) working days when I have a change in staff** using this form.*

Dated this _____ day of _____, 20_____.

 Signature of Head of Firm/Agency

***SUBMIT WITH CONFIDENTIALITY AGREEMENT FOR ACCESS TO ODYSSEY PORTAL (one per user).**