**JOSIE DELVIN**
**BENTON COUNTY CLERK**
7122 W. Okanogan Place Ste. A210
Kennewick, WA 99336
509-735-8388

# Benton County Superior Court Odyssey Portal
# Master Registration

| | | |
|---|---|---|
| Agency/Firm: | | |
| Mailing Address: | | |
| City: | State: | Zip: |
| Email: | | |

[1] **Please provide a phone number for each person that will work for Dual Factor Authentication.**

[2] **Staff within my agency/firm allowed to access and view public cases. All staff should be linked to an attorneys bar number. Each user must have a unique email address.**

| Name | Email (Must be unique, No Generic Emails.) | Phone Number [1] | Bar No. [2] |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Number of Employees in Firm/Agency:

I understand that user ID's and passwords shall not be shared and that I will notify the Benton County Clerk within five working days when I have a change in staff using the Odyssey Portal Modification Form.

Dated this_____day of_____20_____.

_____
Signature Head of Agency/Firm