

**REQUEST TO THE VOLUSIA COUNTY CLERK OF COURT
TO RELEASE REDACTED INFORMATION ON RECORDED DOCUMENTS
(Requested by Protected Party)**

This request is made by

Printed Name: _____

I request that the Volusia County Clerk of Court release an unredacted copy of the following redacted, recorded document:

Date of Request: _____

Document Title: _____

Book Number: _____ Page Number: _____ Instrument Number: _____

Describe the Lawful purpose for the search: ___ Property transaction ___ Employment verification
___ Proof of ownership of residency ___ Explain other _____

Identify the individual or property that is the subject of the search: _____

Identify the information that is to be released (name, address, place of employment):

A copy of the redacted document is attached to this request.

Signature: _____ Print: _____

STATE OF _____

COUNTY OF _____

The Foregoing instrument was Sworn to (or affirmed) and subscribed before me by means of
___ Physical Presence or ___ Online Notarization

By (affiant name) _____,

on this (date) _____ Day of (month) _____, 20 ____.

NOTARY PUBLIC (Signature) or DEPUTY CLERK

Stamp/Seal

NOTARY PUBLIC or DEPUTY CLERK (Print, Type, or
Stamp commissioned name of notary or deputy
clerk)

Personally Known ___ or Produced Identification ___ Type of ID Produced _____