



CRIMINAL/TRAFFIC - COPY/RECORD SEARCH REQUEST

CASE NUMBER(s): _____

DEFENDANT'S NAME(s) (*maiden, married name*): _____

DEFENDANT'S DATE OF BIRTH: _____

Please include any other information to help us to find what you are looking for:

YEARS TO SEARCH (\$2 per name per year) From: _____ To: _____

COPIES OF (\$1 per page and \$2 per document to certify)

Police Report/Charging Affidavit(s) Certified ^{Yes} (\$2 per document)

Disposition(s) Certified (\$2 per document)

Please contact me at the below number to pay for copies by phone

CONTACT INFORMATION

Requestor's Name: _____

Mailing Address: _____

Requestor's Phone Number: _____

Email Address: _____

****Please email your completed form to dispositionrequests@clerk.org**