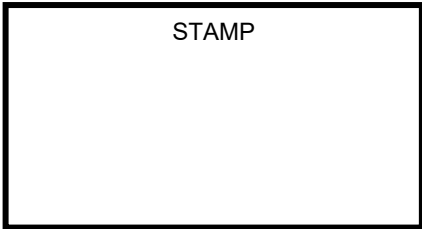


MARICOPA MUNICIPAL COURT - REQUEST FOR COURT RECORDS

39600 W Civic Center Plaza, Maricopa, AZ 85138
Phone (520)494-2300



COURT RECORDS ARE MAINTAINED PURSUANT TO RULE 29, RULES OF THE SUPREME COURT, AND THE SUPREME COURT RECORDS RETENTION AND DISPOSITION SCHEDULE

A research request fee of seventeen dollars (\$17.00) will be charged for each name search up to three (3) names or three (3) cases. A separate request form is required for each name and additional fees will be assessed for copies and certification of case information. The request may take 7-10 business days to be processed.

I hereby declare the public record requested will be used solely for non-commercial purposes.

[] **Please check if you are a government agency (no fees are applicable)**

Name of Requestor (Please Print) Signature of Requestor Date of Request Contact Phone #

I REQUEST INFORMATION FOR THE FOLLOWING INDIVIDUAL/CASE

Print First Name Middle Name Print Last Name Date of Birth

I DO NOT KNOW THE CASE NUMBER. I UNDERSTAND I WILL BE CHARGED FOR EACH NAME SEARCH (UP TO (3) CASES)

Case File Number Citation/ Complaint Number Type of Charge

I AM REQUESTING: _____ Copies only _____ Certification _____ Audio CD
 \$.50 per page \$17.00 per case \$17.00 per CD

I REQUEST COPIES OF THE FOLLOWING DOCUMENT(S):

Complaint/Citation _____ Warrant(s) _____ Sentencing/ Disposition Information _____

Plea Agreement/Proceedings _____ Motor Vehicle Abstract _____

Other: Please be Specific _____

SELECT ONE OF THE FOLLOWING:

_____ **Please call me when records are ready for pick up. Day time Phone # _____**

_____ **Please mail records to the following address: _____**

_____ **Please email records to: _____**

FOR OFFICIAL USE ONLY

Research Request Fee \$17.00 \$ _____
Copies @ \$.50 per page (# of copies _____) \$ _____
Certification @ \$17.00 per case (# _____) \$ _____
CD @ \$17.00 per CD \$ _____

TOTAL AMOUNT DUE: _____

Notified Date: _____ Notes: _____

Records Received: _____ Date: _____