



REQUESTOR CONTACT INFORMATION			
Requestor Name:	Agency:	Date of Request:	
Phone Number:	Fax:		
Mailing Address:			
How would you like to receive the documents?	<input type="checkbox"/> In Person	<input type="checkbox"/> Fax	<input type="checkbox"/> US Mail

COURT RECORDS REQUESTED		
<input type="checkbox"/> Complaint/Citation	<input type="checkbox"/> Guilty Plea	<input type="checkbox"/> Pretrial Diversion Agreement
<input type="checkbox"/> Judgment/Sentence	<input type="checkbox"/> No Contact Order	<input type="checkbox"/> Electronic Docket
<input type="checkbox"/> Other (specify)		
Request must have one of the following combinations: 1) Name and date of birth of a party (the defendant in a criminal matter); 2) Name and Washington driver's license number of a party (defendant in a criminal matter); 3) Case number. Other helpful information is the type of charge and date of violation.		
Name:	Date of Birth:	
Party Driver's License Number / State:	Date of Violation:	
Case Number(s):	Type of Charge:	

*Your request will be processed within 5 days. Court Staff will notify you of expected completion date and associated costs. After fees have been paid, the records will be available by method selected above. If records not claimed within 30 days fees paid are forfeited and reapplication will be required.*

SIGNATURE AND DECLARATION	
I declare under penalty of perjury under the laws of Washington that the following is true and correct. I will not use any requested list of individuals for a commercial purpose (profit expecting activity). (CHAPTER 42.56 RCW)	
Signed this _____ day of _____, 20__ at _____ (City) , _____ (State)	
Signature of Requestor:	Date Submitted:

FEES (there is no fee for inspecting court records)	
<b>Non-Certified Copies</b>	<b>Certified Copies</b>
\$.50 cents per page	\$5.00 first page; \$1.00 each additional page

ACTION TO BE TAKEN WITHIN 5 DAYS (For Office Use Only)	
1. Request received by:	Date Received:
2. Date Requestor Notified of Action to be taken:	Amount Due \$
3. Action taken	<input type="checkbox"/> Request Granted <input type="checkbox"/> Need for Additional Time ( <i>why?</i> ) <input type="checkbox"/> Clarification Needed ( <i>why?</i> ) If applicable, explain why? <input type="checkbox"/> Request Forwarded to attorney for review: _____ Date Forwarded: _____ <input type="checkbox"/> Request Denied <input type="checkbox"/> Record withheld in part per RCW 42.56 which authorizes denial or withholding