

Public Records Request

I, _____ request from the Office of the Municipal Court to () inspect or () obtain copies of the following information:

- () _____
- () _____
- () _____
- () _____
- () _____
- () _____

Signature of
Individual Requesting Information

Date

Phone Number

Address

Public Records Received

I, _____ have inspected or received from the Municipal Court the information requested above:

Signature of
Individual Receiving Information

Date

Magistrate Court Office

Date