Person Filing:	
Address:	
Telephone:	
Email Address:	
Representing Self Attorney (Bar No.)
	CLERK USE ONLY
CAREFREE-CAVE CREEK CONSOLIDATED COURT (0	•
37622 N. Cave Creek Road, Suite B. Cave Creek, A	Z 85331 (P) 480-488-1689 (F) 480-595-9610
STATE OF ARIZONA Plaintiff	Complaint/Docket No.
V.	REQUEST FOR RECORDS
Defendant (First, MI, Last)	
Request for copies	• \$17.00 (Research Fee/per case)
Request for certified copies	\$17.00 (Certification Fee/per case)\$17.00 (CD Fee/per disc)
Request for audio CD	• \$0.50 (Copies Fee/per page)
Request for sealed letter (no record)	
 \$17.00 non-refundable research fee must be paid prior to processing the request for records. \$17.00 certification fee/CD fee and/or \$0.50 per page fee must be paid prior to pick up/mailing. 	
Defendant Name:	
Complaint No.:	Violation Code:
Date of Birth:	_ Last Court Date:
Requested By:	Company:
Address:	
Telephone:	Email:
*Requestor certifies the documents requested are for personal and not commercial use.	