

## Document Request Form

**I understand there is a fee for copies of \$ 0.10 per page, fee of \$10.00 per audio (if flash drive is required), and \$5.00 to mail documents to me (if applicable). I also understand that payment is required in advance and that the Court possesses the authority to deny a request and redact personally identifying information from the documents requested.**

**Requestor name:** \_\_\_\_\_ **Case # (if applicable):** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Phone number(s):** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Check box of documents you are requesting:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Complaint/Petition/Answer               | <input type="checkbox"/> Judgment/Order   | <input type="checkbox"/> Copy of complete file    |
| <input type="checkbox"/> Policies/Procedures                     | <input type="checkbox"/> SRMT written law | <input type="checkbox"/> Previous Court decisions |
| <input type="checkbox"/> Motion filed                            | <input type="checkbox"/> Other: _____     |   |
| <input type="checkbox"/> Audio copy specify hearing dates: _____ |   |   |

**Provide a brief description of the documents you are requesting (i.e. list parties involved in the case, case type) and reason(s) that you are requesting these documents:**

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**(Attach Separate Sheets if Necessary)**

**All Requests will require a minimum of 10 days to complete. If the case is older than one year, it could take as long as two weeks. We will call or email you when the documents are ready for pick up.**

How can we reach you when the request is complete? \_\_\_\_ Telephone or \_\_\_\_ Email

Do you want to have someone else to pick up the documents on your behalf? Please list person(s) name: \_\_\_\_\_

Requestor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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**COURT USE ONLY**

Cost: \$ \_\_\_\_\_

Payment received \_\_\_\_\_

Authorized by (presiding Judge): \_\_\_\_\_

Dated: \_\_\_\_\_

☐ The Court does not have the following Records.

☐ The Court cannot provide copies of the records requested due to the SRMT Open Records Policy. The request must be made at the SRMT Records Department. *Notice sent to requestor.*

☐ The Court requests further clarification as to the request.

☐ The presiding Judge has approved this request.

☐ The presiding Judge has denied the reasoning. *The reasoning must be explained in a written document and sent to the requestor.*

**I have made copies of the records requested and the records have been provided to the requestor in the manner requested. In the event the request has been denied or the Court requests further clarification, the denial or letter requesting further clarification has been provided to the requestor through the format requested.**

Court Staff's Signature: \_\_\_\_\_

Dated: \_\_\_\_\_