



RECORDS SEARCH/REVIEW REQUEST FORM

KAW NATION JUDICIAL OFFICES

Request Date	Preferred Delivery
Records Needed By Date	<input type="checkbox"/> Pick Up <input type="checkbox"/> US Mail <input type="checkbox"/> On Site Inspection <input type="checkbox"/> Fax <input type="checkbox"/> Email

Part A: Fees *(must be paid by money order, cashier's check, personal check or cash in the exact amount)*

Copy Fees: .25 per page	Special Copy Requests: <input type="checkbox"/> Certified Copy \$1.00 <input type="checkbox"/> UCC Records Search Fee \$20.00 per name <input checked="" type="checkbox"/> Audio Reproduction \$50.00 <input type="checkbox"/> Assembly of Record \$1.50 per page	Are you a named party or attorney in this case? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Part B: Requestor Information

Last Name	First Name	Middle Initial
Address		Daytime Telephone Number
City	State	Zip Code
Fax/Email (Optional)		

Part C: Agency Requestor Information

Agency Name	Representatives Name	Title
Address		Telephone Number
City	State	Zip Code
Fax/Email (Optional)		

Part D: Case Identifiers

Case Name	Case Number/Citation Number/Ticket Number
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Part E: Records Requested

Please describe records requested as completely as possible. The title of the document and file date are helpful. Attach additional pages if necessary. (NOTE: UCC records search require a \$20.00 fee per name searched.)

Part F: Reason for Request If Not a Party in the Case

State your reason for requesting to view/copies of the documents. Attach additional pages if necessary.

For Judiciary Use Only

Disposition <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Not Found	Date of Decision	Judge
Record Search Returned <input type="checkbox"/> Records Found <input type="checkbox"/> No Records Found		