

# SUPERIOR COURT OF CALIFORNIA, COUNTY OF SONOMA

REQUESTING PARTY ( <i>Name and Address</i> )	
TELEPHONE NO: _____ FAX NO. (Optional): _____	
E-MAIL ADDRESS (Optional): _____	
<b>HALL OF JUSTICE</b> 600 Administration Drive, Santa Rosa, CA 95403: <input type="checkbox"/> <b>CRIMINAL</b> Room 105J <input type="checkbox"/> <b>CIVIL</b> Room 107J <input type="checkbox"/> <b>TRAFFIC</b> Room 109J <b>CIVIL AND FAMILY LAW COURTHOUSE</b> 3055 Cleveland Avenue, Santa Rosa, CA 95403: <input type="checkbox"/> <b>FAMILY LAW</b> <input type="checkbox"/> <b>PROBATE</b>	CASE OR CITATION NUMBER: <i>(IF KNOWN)</i>
<b>REQUEST FOR RECORDS SEARCH AND/OR COPIES</b>	

**INSTRUCTIONS:** Please complete the information below to request a record search and/or copies of court records. You will be required to pay necessary fees in advance of the records being provided to you. Please note that some cases are confidential. You must be party to a case and have valid photo identification, or have a court order, to obtain copies of confidential cases. Please include a self-addressed, stamped envelope large enough to accommodate the requested documents.

**PLEASE COMPLETE ALL KNOWN INFORMATION**

I am requesting a  Records search  Copy work

Name(s) to be searched: \_\_\_\_\_

(First) (Middle) (Last)

\_\_\_\_\_

(First) (Middle) (Last)

Date of birth: \_\_\_\_\_

Business name to be searched: \_\_\_\_\_

Case Type:  Criminal  Unlimited Civil  Limited Civil  Small Claims  Family Law

Probate Date/Year case started: \_\_\_\_\_ Date/Year case ended: \_\_\_\_\_

I am looking for:  The entire case  The documents listed below

Document(s) Requested ( <i>please be as specific as possible</i> )	Date Filed	Certify Y/N	Exemplify Y/N

In accordance with Government Code sections 70626, 70627, 70628, 70674 and rule 10.815 fees are required as follows:

Records Search Fee: \$15.00 per name searched	Exemplification Fee: \$50.00 per exemplification
Certification Fee: \$40.00 per document	Copy Fees: \$ .50 per page
Certified Divorce Decree: \$15.00 per decree	Off-Site File/Record Retrieval: \$ 5.00

Checks are payable to the “**Superior Court**”. If the amount owed is unknown, indicate in the note/memo section of the check the amount the check cannot exceed (i.e. “**Not to exceed \$XX.XX**”). All checks must be preprinted with the maker’s name and address.

To pay by credit card please complete the following:

I hereby authorize the Superior Court of Sonoma County to charge my credit card account. Credit card charges should not exceed \$\_\_\_\_\_. (Minimum \$10 charge for credit card)

Cardholder Name: \_\_\_\_\_

Visa       MasterCard       Discover       American Express

Cardholder Mailing Address: \_\_\_\_\_

Cardholder Billing Address: \_\_\_\_\_  Same as Mailing Address

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

CVV Code: \_\_\_\_\_

Date: \_\_\_\_\_ Cardholder's Signature: \_\_\_\_\_

*FOR COURT USE ONLY*

Processed By: \_\_\_\_\_

Records Search Fee:	\$ 15.00	x _____	= \$ _____	Total
Copy Fee:	\$ .50	x _____	= \$ _____	Total
Certification Fee:	\$ 40.00	x _____	= \$ _____	Total
Certified Divorce Decree:	\$ 15.00	x _____	= \$ _____	Total
Exemplification Fee:	\$ 50.00	x _____	= \$ _____	Total
Off-Site File/Document Retrieval Fee:	\$ 5.00	x _____	= \$ _____	Total
			\$ _____	Total Fees Due
			\$ _____	Total Fees Paid

Receipt Number: \_\_\_\_\_

- Check/Money Order
- Credit Card
- Fee Waiver (filed and approved)