

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

RI-MC002

REQUESTING PARTY <i>(Name and Address)</i> TELEPHONE NO: _____ FAX NO. <i>(Optional)</i> : _____ E-MAIL ADDRESS <i>(Optional)</i> : _____	Records and Copies can be accessed Online. For more information visit: www.riverside.courts.ca.gov/onlinecopyrequest
<input type="checkbox"/> BANNING 135 N. Alessandro Rd., Banning, CA 92220 <input type="checkbox"/> BLYTHE 265 N. Broadway, Blythe, CA 92225 <input type="checkbox"/> HEMET 880 N. State St., Hemet, CA 92543 <input type="checkbox"/> INDIO 46-200 Oasis St., Indio, CA 92201 <input type="checkbox"/> MORENO VALLEY 13800 Heacock St., Ste. D201, Moreno Valley, CA 92553 <input type="checkbox"/> MURRIETA 30755-D Auld Rd., Ste. 1226, Murrieta, CA 92563 <input type="checkbox"/> PALM SPRINGS 3255 E. Tahquitz Canyon Way, Palm Springs, CA 92262 <input type="checkbox"/> RIVERSIDE APPEALS 4100 Main St. Riverside, CA 92501 <input type="checkbox"/> RIVERSIDE CRIMINAL 4100 Main St. Riverside, CA 92501 <input type="checkbox"/> RIVERSIDE FAMILY LAW 4175 Main St., Riverside, CA 92501 <input type="checkbox"/> RIVERSIDE CIVIL & PROBATE 4050 Main St., Riverside, CA 92501 <input type="checkbox"/> TEMECULA 41002 County Center Dr., Ste. 100, Temecula, CA 92591	CASE OR CITATION NUMBER: <i>(IF KNOWN)</i>

REQUEST FOR RECORDS SEARCH AND/OR COPIES

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. Juvenile records are not available by mail. Please include a self-addressed, stamped envelope large enough to accommodate the requested documents. If a self-addressed, stamped envelope with sufficient postage is not provided the court will include postage fees when completing the check or posting fees to your credit card.

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: _____ Driver's License/ID# _____

Business Name to be searched: _____

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

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	Copy Fees: \$0.50 per page
Certification Fee: \$25.00 per document	Off-Site File/Record Retrieval: \$15.00
Certified Divorce Decree: \$15.00 per decree	Applicable postage
Exemplification Fee: \$50.00 per exemplification	

Checks are payable to the 'Riverside Superior Court'. If the amount owed is known, a check can be submitted with your copy request. 'Not to exceed checks', if the amount is unknown, should indicate the amount the check cannot exceed. All checks must be preprinted with the maker's name and address.

REQUESTING PARTY :	CASE OR CITATION NUMBER: <i>(IF KNOWN)</i>
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To pay by credit card, please complete the following:

I hereby authorize the Riverside Superior Court to charge my credit card account. Credit Card charges should not exceed \$ _____.

Cardholder Name: _____

Visa MasterCard Discover American Express

Card #: _____ Expiration Date: ____ / ____ / ____

Date: _____ Cardholder's Signature: _____

<i>FOR COURT USE ONLY</i>			
Systems Searched: <input type="checkbox"/> Genesis IND-SUN <input type="checkbox"/> Genesis RIV-SUN <input type="checkbox"/> Microfilm <input type="checkbox"/> Microfiche <input type="checkbox"/> Records Center			
<input type="checkbox"/> Other: _____			
Processed by: _____			
Records Search Fee:	\$15.00 x _____	= \$ _____	Total
Copy Fee:	\$ 0.50 x _____	= \$ _____	Total
Certification Fee:	\$25.00 x _____	= \$ _____	Total
Certified Divorce Decree:	\$15.00 x _____	= \$ _____	Total
Exemplification Fee:	\$ 50.00 x _____	= \$ _____	Total
Off-Site File/Document Retrieval Fee:	\$15.00 x _____	= \$ _____	Total
Postage:	\$ _____		
		\$ _____	Total Fee Due
		\$ _____	Total Fees Paid
Receipt Number: _____			
<input type="checkbox"/> Check/Money Order			
<input type="checkbox"/> Credit Card			
<input type="checkbox"/> Fee Waiver (filed and approved)			