

SUPERIOR COURT OF CALIFORNIA, COUNTY OF ALAMEDA	<i>FOR COURT USE ONLY</i>
<input type="radio"/> René C. Davidson <input type="radio"/> 1225 Fallon Street Oakland, CA 94612 Fremont Hall of Justice <input type="radio"/> 39439 Paseo Padre Parkway Fremont, CA 94538	<input type="radio"/> Wiley W. Manuel 661 Washington Street Oakland, CA 94607
	<input type="radio"/> East County Hall of Justice 5151 Gleason Drive Dublin, CA 94568
AGENCY NAME:	Clerk: _____
REQUESTOR'S NAME:	Delivery Preference: <input type="radio"/> US Mail <input type="radio"/> Pick-up <input type="radio"/> QIC
ADDRESS:	
CITY: STATE ZIP CODE	
TELEPHONE:	

CRIMINAL RECORDS REQUEST

USE ONE FORM PER DEFENDANT, PER DOCKET/CASE NUMBER OR ARREST/CONVICTION DATE

DEFENDANT'S NAME	DOCKET NUMBER	DOB	DATE OF ARREST/CONVICTION	ADDITIONAL INFORMATION
Plain Copy .50/page/side	Number of Copies	Certified Copy \$40.00 + page fee**	DOCUMENTS REQUESTED	
<input type="checkbox"/>		<input type="checkbox"/>	Charging Document: Complaint/Information/Indictment	
<input type="checkbox"/>		<input type="checkbox"/>	Waiver of Constitutional Rights (Plea Agreement)	
<input type="checkbox"/>		<input type="checkbox"/>	Court Docket & Minutes on Judgment	
<input type="checkbox"/>		<input type="checkbox"/>	Court Docket & Minutes on Sentencing	
<input type="checkbox"/>		<input type="checkbox"/>	Abstract of Judgment	
<input type="checkbox"/>		<input type="checkbox"/>	Copy of the Request Form	
<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>		<input type="checkbox"/>		
<input type="checkbox"/>		<input type="checkbox"/>		

Add other requested documents not already listed in space provided above. The Clerk's Office cannot provide copies of transcripts that are less than ten years old. To order transcripts that are less than ten years old, please call the Reporter line at 510-627-4942.

Please check here if you require the name of the Court Reporter for a particular hearing. Please indicate which hearing in space provided below.

Hearings:

If you are unable to determine the amount due, submit a check payable to the Alameda County Superior Court with an amount stating "Not to exceed \$75.00" on the memo line at bottom left. This is an estimated amount for the fees due. This payment will allow the clerk to process your request and to apply the monies to the cost of the research and/or copy fees. The clerk will write in the actual amount due on the check, not exceeding the authorized amount of \$75.00, and mail a receipt to the requestor.

To be completed by court personnel only

Receipt Number:			
**Off Site Retrieval Fee:		x \$10.00 =	TOTAL RETRIEVAL FEES
**Search Fee (increments of 10 minutes):		x \$15.00 =	TOTAL SEARCH FEES
Copy Fee:		x \$00.50 =	TOTAL COPY FEES
**Certification Fee:		x \$40.00 =	TOTAL CERTIFICATION FEES
**Postage:			TOTAL POSTAGE
		TOTAL FEES:	

**Certain Government Agencies Exempt

For government agencies only – To pay by credit card, please complete the information below.

Credit Card payment information:

Visa Mastercard

Card Number: _____ CVV: _____ Exp Date: _____

Cardholder's Name (as it appears on the card): _____

Cardholder's Billing Address: _____

Cardholder's Mailing Address (if different from Billing Address): _____

I hereby authorize Alameda County Superior Court to charge my credit card account.

Payment Authorization Signature

Date