SUPERIO	OR COURT O	F CALIFORNIA	FOR COURT USE ONLY				
René C. Davidso 1225 Fallon Stree Oakland, CA 946 Fremont Hall of 39439 Paseo Pace Fremont, CA 945 AGENCY NAME: REQUESTOR'S NAM ADDRESS: CITY: TELEPHONE:	et 661 0 612 Oakl Justice Ire Parkway 538	y W. Manuel (Washington Street and, CA 94607 STATE	East County Hal 5151 Gleason D Dublin, CA 9450 ZIP CC	rive 68	Clerk: Delivery Preference US Mail Pick-up QIC		
		CRI	MINAL RECO	ORDS REQUES	ST		
	USE O	NE FORM PER DEF	ENDANT, PER D	OCKET/CASE NUM	IBER OR ARREST,	/CONVICTION DATE	
DEFENDANT'S NAME		DOCKET NUMBER DOB		DATE OF ARREST/CONVICTION ADDITIONAL INFORMATION		ADDITIONAL INFORMATION	
Plain Copy .50/page/side	Number of Copies		Certified Copy \$40.00 + page fee**		DOCUMENTS REQUESTED		
		Charging Do		GI . D	cument: Complaint/Information/Indictment		
]	Charging Docu	arricine. Compie	,	
]	+	· · · · · · · · · · · · · · · · · · ·	nts (Plea Agreement)	
]	Waiver of Cons	· · · · · · · · · · · · · · · · · · ·	its (Plea Agreement)	
]	Waiver of Cons	stitutional Righ	nts (Plea Agreement) udgment	
]	Waiver of Cons	stitutional Righ & Minutes on J & Minutes on S	nts (Plea Agreement) udgment	
				Waiver of Cons Court Docket & Court Docket &	stitutional Righ & Minutes on J & Minutes on S dgment	nts (Plea Agreement) udgment	
				Waiver of Cons Court Docket & Court Docket & Abstract of Juc	stitutional Righ & Minutes on J & Minutes on S dgment	nts (Plea Agreement) udgment	
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				Waiver of Const Court Docket & Court Docket & Abstract of Juc Copy of the Re	stitutional Righ & Minutes on J & Minutes on S dgment equest Form	nts (Plea Agreement) ludgment Sentencing	
transcripts that a 510-627-4942.	re less than ter here if you req	n years old. To o	rder transcripts	Waiver of Constitution Court Docket & Court Docket & Abstract of Judy Copy of the Resolution Copy of the Resolutio	stitutional Righ & Minutes on J & Minutes on S dgment equest Form he Clerk's Office an ten years old	nts (Plea Agreement) udgment	

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				
**Certain Government Agencies Exempt	TOTAL FEES:					

For government agencies only – To pay by credit card, please comp	olete the informatic	on 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 cr	redit card account.	
Payment Authorization Signature		Date