

Lynnwood Municipal Court

Request for Court Records GR 31

WHAT DOCUMENTS WOULD YOU LIKE? Copy f Copies of Court Recordings are \$20.00 pe Visa/Debit Card					
DO YOU NEED CERTIFIED COPIES? YES / NO	0 (circle one)	\$5.00 1st p	age, \$1.00 ed	าch additional pag	ge
☐ Complaint/Citation/Informati	on 🗆 Judgment	t/Sentence For	m □ No Cor	ıtact Order	
☐ Stipulated Order for Continuan	ice 🗆 🗆 Electron	ic Docket 🗆 P	lea Agreeme	nt	
Other (specify)				_	
After fees have been paid, copies may be picked If you cannot pick up your documents, please in	-				-
RECORD/DOCUMENT INFORMATION *Must have in a criminal matter); 2) Name and Washington drive Other helpful information is the type of charge and da	er's license number of				
Name:					_
Date of birth:			-		
Defendant's Driver's License Number / Stat	te:				
Case Number(s) (or) Type of Charge (or) Da	te of violation: _				
REQUESTOR'S INFORMATION					
Name:	Agency	(if applicable):			
Telephone #:	-				
Mailing Address:				Apt#:	
City:		State:	Zip:		
E-mail Address					
If documents are not clai will be i	imed within 30 or required includ		_	epayment	
I agree that the information obtain protected from commercial use.	ned will <u>not be ı</u>	used for comm	nercial purp	oses, and that it v	will be

Signature of requestor: _____Date: _____

Internal Use Only: Date Requestor Advised:______ Amount Due: \$_____