Request for Record Search Misdemeanor Department 501 West Adams Street, Room 1223 Jacksonville, Florida 32202

# **REQUIRED INFORMATION TO COMPLETE A RECORD SEARCH**

**NAME OF INDIVIDUAL** Full name together with any alias name(s) used.

**DATE OF BIRTH** Month, day and year for each name given including any alias name(s)

**EXTENT OF SEARCH** Number of years to be searched

## FEE SCHDULE: A search fee of \$1.50 per year is assessed by the Clerk's Office.

## **REQUIRED INFORMATION TO OBTAIN COPIES OF DOCUMENTS**

## NAME OF INDIVIDUAL

Full name together with any alias name(s) used

#### DATE OF BIRTH

Month, day and year for each name given including any alias name(s)

#### MISDEMEANOR CASE NUMBE AND/OR STATE ATTORNEY NUMBER AND/OR JAIL OFFENDER NUMBER – If known

#### FEE SCHEDULE

Documents...\$1.00 per page Certification...\$1.50 per page

Upon receipt of your request, a search will be performed. Once the search has been completed, you will be notified by return mail as to the cost and type of payment accepted by the Clerk (Cashier's check of Money Order payable to the Clerk of the Court). When the Clerk has received your payment, the requested information will be promptly forwarded.