FIRCREST/RUSTON MUNICIPAL COURT

115 Ramsdell St, Fircrest, WA 98466 (253) 564-8922 Fax (253) 564-3645

REQUEST FOR ACCESS TO FIRCREST & RUSTON MUNICIPAL COURT RECORDS AND FILES

Request	or's Name:					Firm:	
		(Pleas	e Print)				
Address	:					Phone:	
	Street #	City	State	Zip Code		Email:	
Act. I a	gree that the infor	mation provided will	not be used	for any commerc	cial purposes by me	or the organization	and RCW 42.56, Public Records I represent and the requested Vashington that the foregoing is
SIGNATURE						DAT	
the cour	t Monday through		r business ho	ours from 8:00 a.	m. to 4:00 p.m. If you		aid, copies may be picked up a our documents, please indicate
		ORMATION REQUE			er information you h	ave. If the defen	dant cannot be identified in
Subject's	s full name:				DOB:		
-	Last umber:	F	irst	Midd			_
2 M/HV.	T INFORMATION I	S BEING REQUEST	ED2 ** Inc	Juda Titla of Da	ecord, Dates, Descri	ntion or coloot th	a itama halaw
(If you	ı need additional ı	room please attach	a second pa	ge - sign & date	the second page)		
	Com	plaint/Citation	Judgemo	ent/Sentence	No Contact Orde	er Copy	of Docket
3. THIS	IS A REQUEST T	O: VIEW THE F			USPS (see fee so COPIES (see fee so		PICK UP COPIES
		nominal fee. If the two weeks if paid by				t be paid for in ad	vance along with postage. The
Neither t	the Court nor the C	lerk makes any repr	esentation as	to the accuracy a	and completeness of t	the data except for	court purposes.
\$5.00 ch	narge per documen	t and for each addition	onal page or p	oortion of a page,			nt certified, there is an additiona
	PARTMENT USE						·
DATE R	ECEIVED:	By	FORW	ARDED TO:		ON:	
REQUE	ST APPROVED/DE	ENIED BY	(SIGNATU	RE /NAME/DATE	_ REQUESTOR NO	Date TIFIED ON:	
REASOI	N FOR DENIAL:						