

**INTERTRIBAL COURT OF SOUTHERN CALIFORNIA**

49002 Golsh Road Valley Center, California 92082

Phone: (760) 751-4142

Fax: (760) 751-3078

Web: www.sciljc.org

**DOCUMENT REQUEST**

**Case Information**

Case name: \_\_\_\_\_

Case number: \_\_\_\_\_

**Documents Requested**

- Copy of order (specify date and title): \_\_\_\_\_
- Copy of other document(s) (specify): \_\_\_\_\_
- Audio recording of hearing (specify date and type): \_\_\_\_\_
- Audio recording of other proceeding (specify): \_\_\_\_\_
- Certified copy of order (specify date and type): \_\_\_\_\_
- Certified copy of other document(s) (specify): \_\_\_\_\_

**Delivery Method Requested**

- Mail  Email  Pickup

**Fees**

- Copies: \$0.50 per page
- Audio recordings: \$25.00 per proceeding
- Search of closed cases: \$15.00 per case
- Certified copies: \$15.00 per document
- Mailing: \$1.00

**Payment Methods**

Payments may be made by cash, credit or debit card, business check, money order, or cashier's check. Personal checks are not accepted. A transaction fee is added to payments made by credit or debit card. Business checks, money orders, and cashier's checks must be made payable to the Intertribal Court of Southern California.

**Contact Information**

Full name: \_\_\_\_\_  
Last First Middle

Mailing address: \_\_\_\_\_  
Street  
City State Zip

Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

Date of birth: \_\_\_\_\_

**Photo Identification**

A current driver’s license or other form of photo identification must be submitted with this request.

**Signature**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Once submitted, this request will be processed within 10 business days. Fees must be paid in full before documents will be released and requests with unpaid fees will be cancelled after 10 business days. Information included in this request may be used to update Intertribal Court of Southern California records.

**FOR COURT USE ONLY**

Approved (confirmation number): \_\_\_\_\_ Amount due: \_\_\_\_\_

Not approved (rationale): \_\_\_\_\_

Case name: \_\_\_\_\_ Case number: \_\_\_\_\_

Document(s) released: \_\_\_\_\_

Number of pages: \_\_\_\_\_ Number of proceedings: \_\_\_\_\_

Amount paid: \_\_\_\_\_ Receipt number: \_\_\_\_\_

Method of payment:  cash  credit or debit card  business check  money order or cashier’s check

Court clerk: \_\_\_\_\_ Date: \_\_\_\_\_