



# IN THE HOOPA VALLEY TRIBAL COURT

**Court Address**  
P.O. Box 1389 Hoopa ,CA 95546

**Court telephone no.**  
(530) 625-4305

## RECORDS REQUEST FORM

### REQUESTOR INFORMATION:

LAST NAME: \_\_\_\_\_ MIDDLE INITIAL: \_\_\_\_\_ FIRST  
NAME: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DAYTIME TELEPHONE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### INFORMATION REQUESTED:

CASE NUMBER: \_\_\_\_\_

NAME OF PETITIONER/ DEFENDANT: \_\_\_\_\_

RECORDS REQUESTED: \_\_\_\_\_

DOCUMENT    DISPOSTION    CASE FILE    OTHER

CERTIFIED COPIES

### JUDICIARY USE ONLY

FOR RECORD REQUESTS OVER \$50

TOTAL EST. COST: \_\_\_\_\_

DEPOSIT AMOUNT: \_\_\_\_\_ ESTIMATED BALANCE: \_\_\_\_\_ DEPOSIT DATE: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

DISPOSITION INFORMATION: \_\_\_\_\_

DELIVERED DATE: \_\_\_\_\_ DENIED DATE: \_\_\_\_\_ UNAVAILABLE DATE: \_\_\_\_\_

If request is denied or records are unavailable, explain here: