

COURT FILE CHECKOUT FORM*

* **NOTE:** Please take the file directly to the Civil Counter on the third floor.

File No.: Chy/Law/Fid _____

Date: ____/____/____

Complainant/Plaintiff,

Versus

Defendant.

Reason File is Checked Out:

____ Obtain Copies

____ Review Files

____ Service

____ Other (Please Specify)

Please Print and Sign Your Name:

Attorney's Name
(PLEASE PRINT)

Attorney's Signature

Court Clerk's/Law Clerk's Initials: _____