

**PAHRUMP JUSTICE COURT**  
**Court Records Request Form**

Requests may be submitted in person, by mail, or electronically at [PJC@pahrumptjusticecourt.com](mailto:PJC@pahrumptjusticecourt.com)

**Name of Requester:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Date of Request:** \_\_\_\_\_  **Expedited Request – same day service (\$50.00)**

**Member of the Media**  **YES**  **NO** **If YES, which media outlet?** \_\_\_\_\_

**Manner of Delivery to Requester:**

In person  Regular mail to: \_\_\_\_\_

Via e-mail to the following address : \_\_\_\_\_

**Copy Request—Part 1 (Type of Copy):**

- |  |   |
|--|---|
| <input type="checkbox"/> <b>Plain Copy</b> (\$0.50 per page)   | <input type="checkbox"/> <b>Electronic Copy</b> (\$0.50 per page)         |
| <input type="checkbox"/> <b>Certified Copy</b> (\$3.00 per transaction)  | <input type="checkbox"/> <b>Closed-Case Report</b> (\$0.50 per page)      |
| <input type="checkbox"/> <b>Abstract of Judgment</b> (\$3.00 per transaction)  | <input type="checkbox"/> <b>Offsite File Retrieval</b> (\$10.00 per case) |
| <input type="checkbox"/> <b>Exemplified Judgment</b> (\$9.00 per transaction)  | <input type="checkbox"/> <b>JAVS</b> (use CRRF #B)                        |
| <input type="checkbox"/> <b>Letter of "No Record"</b> (\$3.00 per certification; <i>uncertified</i> copy of letter of "no record" provided at no cost) |   |

**Copy Request—Part 2 (Specific Document Type):**

**Case Number(s):** \_\_\_\_\_

**Check the Type of Document (to be provided with appropriate redactions, where applicable):**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Criminal Complaint                    | <input type="checkbox"/> Criminal Disposition (JOC) | <input type="checkbox"/> Warrant/Summons         |
| <input type="checkbox"/> Domestic Violence Admonishment/Waiver | <input type="checkbox"/> Civil Complaint            | <input type="checkbox"/> DUI Admonishment/Waiver |
| <input type="checkbox"/> Civil Answer                          | <input type="checkbox"/> Civil Judgment             |  |
| <input type="checkbox"/> Court Minutes                         | <input type="checkbox"/> Other: _____               |  |

**Research Request (Fee: \$1.00 per name per year)**

**Name to Search:** \_\_\_\_\_ **Years to Search:** \_\_\_\_\_ years (maximum of 10 years)

**Date of Birth** (if research request is for Criminal case)  \_\_\_\_\_  **Unknown**

All requesters are hereby advised that if the original estimated cost is less than the actual cost due, the requester will be responsible for promptly paying the full amount due before the request will be fulfilled.

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**THE BOTTOM PORTION OF THE FORM IS TO BE COMPLETED BY COURT STAFF ONLY**  
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**Requested Item(s) Provided as Follows:**

- (1) Request Fulfilled by: \_\_\_\_\_
- (2) Total Cost of Request: \_\_\_\_\_
- (3) Receipt:  Receipt Number Issued (receipt # \_\_\_\_\_)
- (4) Delivered Item(s) to Requester as Follows:
- |  |                                      |
|--|--------------------------------------|
| <input type="checkbox"/> Placed in Pickup Bin  | on the following date: _____, 20____ |
| <input type="checkbox"/> Mailed                | on the following date: _____, 20____ |
| <input type="checkbox"/> E-Mailed to Requester | the following date: _____, 20____    |