



REQUEST FOR DOCUMENTS

Fax requests to: (772) 288-5990

Mail to: P.O. Box 9016

Stuart, FL 34995

Defendant Name: _____ **Date of Birth:** _____

Case# (if known): _____ **Year of Arrest:** _____

Charges: _____

Please ✓ all that apply:

Arrest : _____ **Sentence/Judgment:** _____ **Indictment/Information:** _____

Probation Order: _____ **Plea Packet:** _____ **Termination of Probation:** _____

Other documents, please specify: _____

I would like the documents requested above to be certified _____

Name: _____ **Phone#:** _____

Please note: There is a fee of \$1.00 per copy and an additional fee of \$2.00 per document for certification.

DISCLAIMER:

The clerk is responsible for researching only the EXACT NAME furnished by you and is not responsible for conducting a search under a similar name.

While the Clerk's Office strives to provide the most accurate information available, we cannot perform the services available from a title company. The Clerk hereby expressly disclaims any and all liability for damages arising out of or as a result of errors or omissions in conducting the search, or with regard to the above information.