

**BELL COUNTY**  
**CONFIDENTIAL RECORDS COPY REQUEST FORM**

Our office charges \$10.00 record search fee. This is payable by exact cash or money order and is due at the time of filing the request. A copy of a picture I.D. or driver's license is required.

Date: \_\_\_\_\_ Cause / Case #: \_\_\_\_\_

Style (Names) of Case: \_\_\_\_\_

\_\_\_\_\_

Approximate Date of Document(s): \_\_\_\_\_

Document(s) You are Requesting: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Person Requesting Information: \_\_\_\_\_

Relationship to Case: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Daytime Phone #: \_\_\_\_\_

Reason for Request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Signature

On this day the above application for release of records was presented for approval.

I therefore **GRANT / DENY** the request for the release of the aforementioned information.

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

Judge