

**12<sup>th</sup> JUDICIAL DISTRICT COURT**

Traffic / Criminal History Request

File Review / Copy Request Form

1. Date of Request: \_\_\_\_\_

2. Requested by: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (home) \_\_\_\_\_ (office) \_\_\_\_\_ Fax: \_\_\_\_\_

3. Please provide the **complete name & date of birth** of the person in question:

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ **\*\*\* SEE ATTACHED SCAO FORM MC97 \*\*\***

4. Please specify how you would like the information returned to you: (Circle one)

Pick Up  Mail  Fax

***A Defendant History Inquiry will be provided to you upon completion of our search. If you require additional information, please complete the following:***

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

\_\_\_\_\_

\_\_\_\_\_

If copies are requested, please list documents to be copied:

- |                          |  |   |
|--------------------------|--|---|
| <input type="checkbox"/> | Complete case file (except non-public Court records) |   |
| <input type="checkbox"/> | Judgment of Sentence                                 | <input type="checkbox"/> Certified Judgment of Sentence<br>(a \$12 fee will be charged) |
| <input type="checkbox"/> | Order of Probation                                   |   |
| <input type="checkbox"/> | Discharge from Probation                             |   |
| <input type="checkbox"/> | Other: _____   |   |

\_\_\_\_\_

**PLEASE NOTE:** A charge may be incurred with this request. Please check with a Court Clerk to see if a fee applies. Also, information relating to files 10+ years older than the current year will be on microfilm and availability may be limited.

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For Court Use Only

Handled by \_\_\_\_\_ on \_\_\_\_\_  
(Court Clerk) (Date completed)

12th	<b>STATE OF MICHIGAN</b> <b>JUDICIAL DISTRICT</b> <b>JUDICIAL CIRCUIT</b> <b>COUNTY PROBATE</b>	<b>PROTECTED PERSONAL</b> <b>IDENTIFYING INFORMATION</b>	<b>CASE NO. and JUDGE</b>
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Court address 312 S. Jackson St. Jackson, MI 49201	Court telephone no. 517-788-4250
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Plaintiff's/Petitioner's name	<b>v</b>	Defendant's/Respondent's name
In the matter of _____		

This form is nonpublic because it contains personal identifying information (PII) that is protected from public inspection under MCR 1.109(D)(9)(a). Use this form to provide PII only for a person who is a defendant, respondent, or decedent. If the person is a plaintiff, petitioner, or other individual, use form MC 97a.

**Instructions:**

- When PII (such as date of birth) must be filed with the court on a public document, DO NOT include it on that public document. Instead, you must provide it on this form.
- **Provide only** the protected PII required for your particular case. For example, if you are filing a public document that requires you to provide a date of birth to the court, complete only that field on this form.

Name of form/document that this MC 97 is being filed with: \_\_\_\_\_

Printed name of individual completing form and date \_\_\_\_\_

**Instructions:** Provide the name of the person that the PII applies to, followed by the specific PII that is required to be provided. For Other, specify the type of PII in addition to the PII itself. Use the below reference number (Ref. No.) in the public document in place of the protected PII. For example, insert "Ref. No. 1" in place of the DOB in the public document.

Ref. No.	Name (required)
1	Date of birth
2	National ID no. / Last 4 digits of SSN XXX-XX-_____
3	Driver's License / State-issued ID no.
4	Passport no.
5	Other

Ref. No.	Instructions: List the name of the financial institution and the account number. List the paragraph that references the account, if needed for clarity. Use reference number (Ref. No.) when necessary to refer to account in public documents.		
6	Financial institution	Account no.	Paragraph no.
7	Financial institution	Account no.	Paragraph no.
8	Financial institution	Account no.	Paragraph no.
9	Financial institution	Account no.	Paragraph no.