

SUPERIOR COURT OF CALIFORNIA

County of San Benito 450 Fourth Street, Hollister, CA 95023

Criminal History Request

Date of Request:	
Name : *	
Alias:	
DOB: *	CDL:
CASE#: *	CII:
	son authorized by law to receive a record or information obtained from a record formation to a person who is not authorized by law to receive the record or
Requested by:	Title:
Reason:	
DURING BUSINESS HO	COURT: FAX COMPLETED FORM TO: URS ATTN: RECORDS MON-THU 8AM – 5PM 831-636-1416
For Sheriff's Office Use Only	
Request Completed By: Comments:	Date Completed:

*field with an asterisk must be completed, if DOB not know, give an estimate

CRIMINAL HISTORY REQUEST