

REQUEST FOR DISCOVERY

Please *legibly* **PRINT** the following information:

Date: _____

Name: _____ (Last) _____ (First) _____ (MI)

Mailing Address: _____
(Street Address or P.O. Box)

(City, State and Zip Code)

Phone # _____

Case Number *(at top of citation)*

Please fill in the appropriate number starting with: CB _____

_Z _____

IB _____

CC _____

DATE OF NEXT HEARING: _____

Signature: _____

PROSECUTOR USE ONLY

Date Sent: _____

Sent By: _____

Photos: _____ 911 _____