Hon. Christopher E. Ward
Chief Judge

R. Javoyne Hicks, Esq.
Interim Court Administrator/
Chief Clerk

Municipal Court of Atlanta
Attn: Clerk's Office
150 Garnett Street, SW
Atlanta, GA 30303

REQUEST FOR COURT DOCUMENTS

Last Name/Alias: _____ First Name/Alias: _____

Date of Birth (MM/DD/YYYY): _____ Driver's License Number: _____

Race: _____ Sex: ☐Female ☐Male SSN (last 4 digits):_____

Requestor (if not defendant): _____ Company/Law Firm: _____

Email: _____ Telephone: _____

	Citation/Case Number	Violation Date	Charge(s)	Documents Requested
1				☐ 912 ☐ Court Correction ☐ Citation ☐ Disposition
2				☐ 912 ☐ Court Correction ☐ Citation ☐ Disposition
3				☐ 912 ☐ Court Correction ☐ Citation ☐ Disposition
4				☐ 912 ☐ Court Correction ☐ Citation ☐ Disposition

☐Other (Please identify which documents are being requested):_____

☐ Certified Copy (with seal):
Pick up:
$2.50 first page ($0.50 additional page)

Mail Fee:
Additional fee based on page count

☐ Non- Certified Copy:
Pick up:
$1.00 per page

Mail Fee:
Additional fee based on page count

Delivery Method: ☐Pick up ☐Mail to: _____
Address City, State Zip

NOTE: Make money order or business/cashier's check payable to: Municipal Court of Atlanta. **Personal checks will not be accepted.**

_____ _____
Signature Date

_____
Printed Name

OFFICIAL MUNICIPAL COURT OF ATLANTA USE

Accepting Clerk: _____ File Date: _____