

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):		FOR COURT USE ONLY
<p>TELEPHONE NO.: _____</p> <p>E-MAIL ADDRESS (Optional): _____</p> <p>ATTORNEY FOR (Name): _____</p>		
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b>  STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____		
CHILD'S NAME: _____ CHILD'S DATE OF BIRTH: _____		CASE NUMBER: _____
<b>PETITION TO OBTAIN REPORT OF LAW ENFORCEMENT AGENCY</b>		RELATED CASES (if any): _____
1. Petitioner's name and address (if representing another person, organization, or agency, provide names and addresses):  _____		
2. Petitioner's relationship to child (if any):  _____		
3. Police department or law enforcement agency possessing records:  Report number: _____		
4. The reasons for this request are: (Describe in detail. Attach additional pages if necessary.)  _____		
<input type="checkbox"/> Continued in Attachment 4.		
5. <input type="checkbox"/> The Notice to Child and Parent/Guardian Re: Release of Juvenile Police Records and Objections (form JV-580) was served on the <input type="checkbox"/> child or <input type="checkbox"/> parent on (date):  _____		

I declare under penalty of perjury under the laws of the State of California that the foregoing and all attachments are true and correct.

Date:



(TYPE OR PRINT NAME)

(SIGNATURE OF PETITIONER)

Number of pages attached: \_\_\_\_\_

PETITION GRANTED     PETITION DENIED  
 ADDITIONAL ORDERS:

Date:

JUDICIAL OFFICER

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