

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF FLORIDA
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PLEASE REPLY
TO:

- ☐ 301 N. Miami Ave., Room 150, Miami, FL 33128, (305) 714-1800
- ☐ 299 E. Broward Blvd., Room 112, Ft. Lauderdale, FL 33301, (954) 769-5700
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ARCHIVES REQUEST FORM

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SECTION A: TO BE COMPLETED BY REQUESTOR (Please Print)

Requestor's Name: _____ Date: _____
Address: _____ Phone: _____
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Case or Adv. No.: _____ Debtor Name or Case Caption: _____

SmartScan ☐ Yes ☐ No

[If needed, obtain a PACER account at www.pacer.gov to search court records for the data below. PACER query fees may apply.]

List each Docket and/or Claim Number requested and description. *Requests with missing numbers will not be accepted.*

SECTION B: FOR CLERK'S OFFICE USE ONLY

Accession # 021 - _____ Loc. # _____ Box # _____ SmartScan ☐ Yes ☐ No
Request verified by _____ Date _____ / _____ / _____ Amount Paid \$ _____ Receipt # _____ Clerk _____
Express Acct# _____ Requested from FRC _____ / _____ / _____ by _____ RMS changed ☐
Date Rec'd _____ / _____ / _____ Notified via ☐ Email ☐ telephone ☐ forward to _____
division

Request No. _____