

# Dorothy Brown, Clerk of the Circuit Court of Cook County

## File Request Form

Case Number \_\_\_\_\_ Please use a separate request form for each file.

### YOU MUST SUBMIT IDENTIFICATION TO REVIEW COURT FILES

Requestor's Name (please print) \_\_\_\_\_

Law Firm (if applicable) \_\_\_\_\_

Attorney Number (if applicable) \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_

#### IDENTIFICATION SUBMITTED

\_\_\_ Attorney Identification Card

\_\_\_ Drivers License

\_\_\_ State Identification Card

\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_  
Time In and  
Clerk's Initials

\_\_\_\_\_  
Time Out and  
Clerk's Initials

### DO NOT REMOVE FILES FROM THE CLERK'S OFFICE

*The undersigned acknowledges and understands that the files and their contents are official court documents that are controlled by the Clerk of the Circuit Court. Destruction, mutilation, alteration, or theft of these files or documents constitutes a crime (720 ILCS 5/32-8). All violations will be prosecuted to the fullest extent allowed by law.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date