David A. Smith Juvenile Court Clerk



Juvenile Justice Center 100 Woodland St. Nashville, TN 37213 615-862-7980

REQUEST TO REVIEW OR COPY A JUVENILE FILE

Re:	File #:	dob:
Name:	Date:	
Relationship to Case:	Phone:	
Official Position:		
Reason for Inspection:		
In accordance with Rule 33 and TCA 37-1 interest in this proceeding are legitimate. I information provided in this request is true. Requests for file to be viewed shall be maddate.	I swear or affirm, under ne for the purpose(s) stat de in advance and must	the penalty of perjury, that the ted herein. be at least 4 days prior to any court
All files will be made available for viewing File review appointment times will be mad 3:30pm Unless you are appointed on a case, you w Appointed Attorneys will be charged 10 cd All attorneys must be retained by one of the Certain information in the file may require	de during the hours of 8a rill be charged 50 cents p ents per copy. he parties to view the file	am to 1:00am and from 2pm to per copy.
Once we receive the file a member of our s		set an appointment date & time.
Signature:		Date:
Deputy Clerk Signature:		
	In Order Viewer	Out of Order Clerk Employee
Signature:		
Rev 1/2016		