

Request Form for Bank Account, Debit, Charge and Credit Card Number Removal

Date: _____

Name of Holder of Account: _____

Phone Number: (optional) _____

Relationship to Requester:

Self

Attorney, specify

Legal Guardian, specify

For Redaction/Removal of Account Numbers from an Official Record Image on a Publicly Available Internet website, please provide:

Instrument Number/Book and Page Number/Document Type

For Redaction/Removal of Account Numbers from Court Records, please specify:

Case Name/Case Number/Document Heading/Page Number

Signature: _____

For Office Use Only:

Date Request Received _____

Date Request Completed _____

Clerk Processing Request _____