IN THE COURT OF COMMON PLEAS OF PHILADELPHIA COUNTY

	: FAMILY COURT DIVISION
Plaintiff/Petitioner (in DR case)	Protection From Abuse Case No. <i>(if applicable)</i>
VS.	
Defendant/Respondent (in DR case)	PACSES Case ID No. (if applicable)
	: Docket Number
	Domestic Relations Case Record
(Pursuant to Family Con	urt Administrative Regulation 97-1)

To the Honorable, the Judges of said Court:

The petition of			respectfully represents:
1.	Petitioner is relations case, nor the	e attorney of record in the domes	, who is neither a party to the above-captioned domestic stic relations case for a party to the case.
2.	Petitioner's	□ residential address is:	\Box business address is:

- 3. Pursuant to the provisions of Family Court Administrative Regulation 97-1, Petitioner is seeking access to the domestic relations case record in the above captioned matter, which is:
 - A Protection From Abuse matter. (File this petition at: Domestic Violence Unit, Room 891, Family Court Building, 1501 Arch Street, Philadelphia, PA 19102.)
 - A support and/or custody and/or divorce matter. (File this petition at: Clerk of Family Court, 11th Floor, Family Court Building, 1501 Arch Street, Philadelphia, PA 19102.)

4. Petitioner is seeking access to the domestic relations case record to (check all that apply):

 Review only
 Review record and copy document(s) from same

□ Obtain certified copies of documents □ Obtain certified copy of entire record

- \Box Other (specify): _
- 5. Petitioner is seeking the indicated access to this domestic relation case record for the following reason(s) (specify reason(s) and attach supporting documentation, if any, of the reason(s) for which access to the domestic relations record is requested; e.g., documentation of the other civil, criminal, or administrative action for which the access to the domestic relations record is sought, including the names of the parties to the other action and the identifying case and/or docket number of the other action):

WHEREFORE, the Petitioner prays this Honorable Court to GRANT the relief requested in this petition.

(Petitioner)

I verify that the statements made in this Petition for Special Relief are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. §4904 relating to unsworn falsification to authorities.

(Petitioner)

Date of Filing:

09-4