



**INDIANA SUPREME COURT  
DIVISION OF STATE COURT ADMINISTRATION  
30 SOUTH MERIDIAN STREET, SUITE 500  
INDIANAPOLIS, IN 46204  
317.232.2542**

**REQUEST FOR RELEASE OF  
BULK DATA/COMPILED INFORMATION  
(NOT EXCLUDED FROM PUBLIC ACCESS)**

To the Executive Director of State Court Administration:

Requestor submits this request under Administrative Rule 9(F)(3) for release of bulk data/compiled information not excluded from public access by Administrative Rule 9(G).

<b>I. Identity of Requestor</b>	
<b>Address</b>	
<b>Contact and Title</b>	
<b>Telephone:</b>	
<b>E-Mail:</b>	<b>None</b> _____
	Enter Email Address
<b>Website:</b>	<b>None</b> _____
	Enter Website Address

<b>II. List all known business entity names related to Requesting Party that will participate in the use and dissemination of the data provided:</b>	
<b>None</b>	<b>Listed Here</b>

**III. Identification of bulk data/compiled Information sought (specify and describe the records sought and the compiler or location):**

**IV. Identify the frequency with which bulk data and compiled information is being requested to be transferred to Requestor by each Court listed in Section III.**

**One Time Distribution                      Periodic \_\_\_\_\_**  
**Frequency Desired**

**V. Identification of Court(s) exercising jurisdiction over the records (list the courts):**

**VI. Purpose for Request: What is the purpose of the request and how is release of the requested data consistent with the purposes of Administrative Rule 9 (set forth reason)?**

**VII. Describe how fulfilling the request is an appropriate use of public resources.**

**VIII. Attach a sample copy of all Requesting Party's company policies/user agreement provided to the Requesting Party's subscribers, customers, clients, or other party that govern the use of the data listed in II.**

**IX. Requestor is or is not willing to pay an amount determined to be the fair market value of the information. If not, why?**

**Willing to Pay                      Unwilling to Pay. Reason \_\_\_\_\_**

**By signing this request, I represent that I am authorized to do so on behalf of Requestor.**

<b>Signature</b>	
<b>Printed Name</b>	
<b>Title</b>	
<b>Date</b>	