

**SUPERIOR COURT OF CALIFORNIA, COUNTY OF**

DEPARTMENT AND DIVISION:  
JUDICIAL DISTRICT OR BRANCH COURT:  
MAILING ADDRESS:  
STREET ADDRESS:  
CITY AND ZIP CODE:  
TELEPHONE:  
FAX:

**REPORT TO THE JUDICIAL COUNCIL:  
SUPERIOR COURT RECORDS DESTROYED, PRESERVED, AND TRANSFERRED**

1. You are hereby notified, as required by rule 6.755(l) of the California Rules of Court, that the following superior court records were (check only one category per report):
- a.  Destroyed by court order (date of order):  
 and preserved in another medium (specify):
  - b.  Preserved for the  comprehensive or  sample court records (specify the location of the records below, if different from the court address above).
  - c.  Transferred to an entity under rule 6.756 (specify location of the records below if different from the organization's address).  
**Attach a copy of Judicial Council Form 982.8(2)(R).**

Record Type	Beginning and Ending Case Numbers	Beginning and Ending Month and Year	Medium
2.			<input type="checkbox"/> Paper <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other (specify):

Location:

3.			<input type="checkbox"/> Paper <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other (specify):
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Location:

4.			<input type="checkbox"/> Paper <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other (specify):
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Location:

Date: \_\_\_\_\_ Clerk, by \_\_\_\_\_, Deputy

(If necessary, use the reverse of this page to continue)

Record Type	Beginning and Ending Case Numbers	Beginning and Ending Month and Year	Medium
5.			<input type="checkbox"/> Paper <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other ( <i>specify</i> ):
Location:			
6.			<input type="checkbox"/> Paper <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other ( <i>specify</i> ):
Location:			
7.			<input type="checkbox"/> Paper <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other ( <i>specify</i> ):
Location:			
8.			<input type="checkbox"/> Paper <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other ( <i>specify</i> ):
Location:			
9.			<input type="checkbox"/> Paper <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other ( <i>specify</i> ):
Location:			
10.			<input type="checkbox"/> Paper <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other ( <i>specify</i> ):
Location:			
11.			<input type="checkbox"/> Paper <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other ( <i>specify</i> ):
Location:			
12.			<input type="checkbox"/> Paper <input type="checkbox"/> Microfilm <input type="checkbox"/> Electronic <input type="checkbox"/> Other ( <i>specify</i> ):
Location:			