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**HOBBS MUNICIPAL COURT**

301 N. Turner  
Hobbs, New Mexico 88240  
Phone 575.397.9272  
Fax 575.397.9365

DATE: \_\_\_\_\_

TO: Hobbs Municipal Court, Shannon Arguello  
Records Custodian  
301 N. Turner, Hobbs, New Mexico 88240

FROM: \_\_\_\_\_  
[NAME OF REQUESTER]  
\_\_\_\_\_  
[ADDRESS]  
\_\_\_\_\_  
[TELEPHONE NUMBER]

I would like to inspect and copy the following records:  
[LIST RECORDS WITH REASONABLE PARTICULARITY]

If your agency does not maintain these public records, please let me know who does, and include the proper custodian's name and address.

I agree to pay the applicable fees for copying and transmitting the records. If the charges will exceed \$\_\_\_\_\_ please call me to discuss. I understand that I may be asked to pay the fees in advance.

Please provide a receipt indicating the charges for each document.

Thank you for your prompt attention to this matter.

Sincerely,

\_\_\_\_\_  
Signature of Requestor