

IN THE CIRCUIT/COUNTY COURT OF THE SIXTH JUDICIAL CIRCUIT
IN AND FOR PASCO/PINELLAS COUNTIES, FLORIDA
DIVISION

Plaintiff(s),

v.

Case No. _____

UCN: _____

Defendant(s).

DIRECTIONS TO CLERK:

This Motion should be docketed using only the word "Motion."

Motion to Determine Confidentiality of Court Records
- Special Criminal Records

[This form to be used only to determine confidentiality of plea agreements, substantial assistance agreements, or other court record that reveals the identity of a confidential informant or active criminal investigative information]

1. This motion is filed by or on behalf of State of Florida, Defendant.

2. I respectfully request that the Court determine that the following court records are confidential and order the Clerk to seal the records in accordance with Rule of Judicial Administration 2.420(c)(9):
 - _____ plea agreement
 - _____ substantial assistance agreement
 - _____ documents that reveal the identity of a confidential informant
 - _____ documents that reveal active criminal investigative information

3. The Court should determine the record is confidential for the following reasons:

_____.

[Explain why the court should find the record confidential. Do not reveal the information to be determined confidential.]

4. Confidentiality of the information sought to be sealed is required to protect the following interests: [select all that apply]

- _____ a. Prevent serious and imminent threat to the fair, impartial, and orderly administration of justice
- _____ b. Protect a compelling governmental interest
- _____ c. Avoid substantial injury to innocent third parties
- _____ d. Complying with established public policy set forth in the Florida or U.S. Constitution or statutes or Florida rules or case law, specifically:

_____.

5. There is no less restrictive measure available to protect these interests and the degree, duration, and manner of confidentiality sought is no broader than necessary to protect the interests.

6. I have consulted with the Assistant State Attorney Attorney for Defendant Defendant and they agree do not agree with this motion.

7. I certify that this motion is made in good faith and is supported by a sound factual and legal basis.

8. I acknowledge that I may be subject to Court sanctions if this motion is not made in good faith and is not support by a sound legal or factual basis.

DATED: _____

[Signature] _____
Printed name _____
Address _____
Phone number _____
Fax number _____
Florida Bar No. _____
Email address _____

CERTIFICATE OF SERVICE

I certify that the original was filed with the Clerk of the Circuit Court and that a copy of this document was furnished by () Email () U.S. mail () hand delivery or () facsimile to _____ on _____, 20____.

[Signature]