

**PLEASE COMPLETE FORM IN ITS ENTIRETY**  
**INCOMPLETE FORMS MAY RESULT IN REJECTION OF YOUR REQUEST**



**OFFICE OF COURT ADMINISTRATION**  
**REQUEST FOR PUBLIC INFORMATION FOIL FORM**  
**JUDICIAL OATH CARD**

**PLEASE NOTE: TO OBTAIN COPIES OF RECORDS SUBJECT TO DISCLOSURE UNDER FOIL, YOU  
MAY SUBMIT A SPECIFIC FOIL REQUEST VIA ELECTRONIC MAIL TO THE FOLLOWING ADDRESS:  
FOIL@NYCOURTS.GOV**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip Code)

\_\_\_\_\_  
(Phone)

Email Address: \_\_\_\_\_

**Please identify the specific Judge and the year(s) or term(s) of office for each oath requested.**

Name of Judge

Year(s) /Term(s) of Office

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Signature*