

# Internet Image Removal Request Form

Date of Request: \_\_\_\_\_  
Name of Requester: \_\_\_\_\_  
Phone Number (Optional): \_\_\_\_\_  
E-Mail Address (Optional): \_\_\_\_\_

**Pursuant to F.S. 28.2221, the Official Records image(s) listed below pertain to the following types of documents on a publicly available Internet website:**

- **Military Discharge**
- **Death Certificate**
- **Court file, record, or paper relating to matters or cases governed by the Florida Rules of Family Law, the Florida Rules of Juvenile Procedure, or the Florida Probate Rules**

Instrument # \_\_\_\_\_ Book # \_\_\_\_\_ Page # \_\_\_\_\_  
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**Please complete this form and deliver it in person, by mail, or facsimile.**

**Location:** Clerk of the Circuit Court  
Recording Department  
Rm # 140  
419 Pierce St.  
Tampa, Florida 33602

**Mailing Address:** Clerk of Circuit Court  
Recording Department  
P.O. Box 3249  
Tampa, FL 33601

**Email:** [Recording@hillsclerk.com](mailto:Recording@hillsclerk.com)

**Fax:** (813) 272-5004

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### For Office Use Only

Date Request Received: \_\_\_\_\_ Date Request Completed: \_\_\_\_\_

Received by: \_\_\_\_\_ Deputy Clerk