State of Alabama
Unified Judicial System

FORM No. UTC-3 **REV . 5/23**

UTC TRANSMITTAL FORM

UTC Control

Page____of____Pages

TO: *(Court Name & Address)*

☐ The District Court of ☐ The Municipal Court of

Court Name : _____

Court Address: _____

_____

FORM: (Law Enforcement Agency Name & Address)

Agency ORI :

Agency Name: _____

Agency Address: _____

_____

SERIES	UTC NUMBER	DATE ISSUED	D.L. ATTCH.	REMARKS (DEFENDANT'S NAME AND/OR OFFENSE)	COURT CASE NUMBER		
						Year	Number
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The above listed traffic tickets were written by:

_____
Officer's Signature

Officer's Identification Number:

_____
Officer's Name (please print)

The above listed traffic tickets were sworn to by:

_____
Magistrate's Signature

Date: _____

_____
Court City/County

☐ District Court:
☐ Municipal Court:

The above listed traffic tickets are received for court action by:

_____
Clerk's Signature (If different from magistrate)

Date: _____

☐ magistrate shown above
☐ clerk shown here

Original – Court Copy – Police Agency

COURT ORI: AL | | | | | | | J