



Eighteenth Judicial Circuit Written Transcript Request Form (Seminole County Use Only)

Presently, there are two ways to receive a copy of digitally recorded court proceedings; a typed transcript or an audio/video CD. This form is to be used to receive a quote for a written transcription of a digitally recorded court proceeding

Please complete all sections as failure to provide any information may delay your request. Proceedings that are confidential in nature, such as Juvenile Dependency or Delinquency, may be obtained only with a signed court order. You will be contacted with a quote for this service and payment instructions by a court reporter authorized to transcribe digitally recorded court events.

Requester:		Today's Date:
Business/Firm/Lawyer Name:		Contact:
Mailing/Billing Address:		
Phone Number:	Fax Number:	Email Address:
Public Defender/State Attorney Authorization:		

Case Number		
Case Style (e.g.: State v. Name, Interest of Name, Name v. Name)		
Date of Proceeding:	Time of Proceeding:	Type of Proceeding:
Courtroom: <input type="checkbox"/> Criminal Justice Center <input type="checkbox"/> Juvenile Justice Center <input type="checkbox"/> Downtown Civil Courthouse		
Courtroom:	Presiding Judge/Magistrate:	
<input type="checkbox"/> Transcript of Full Proceeding (includes 1 copy)	Number of additional copies _____	<input type="checkbox"/> Transcript of Partial Proceeding Number of additional copies _____
Description of Partial Event:		
Transcription requested:	<input type="checkbox"/> Regular (30 days)	<input type="checkbox"/> Overnight (1 day) <input type="checkbox"/> Expedited (3-5 days)

Please mail or deliver this completed form to: Faxed requests 407-665-4991	Court Administration ATTN: Digital Court Reporters Criminal Justice Center 101 Bush Boulevard Sanford, FL 32773
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Official Use Only		
Date Received:	Date Completed:	Sent Date:
Referred to:	Copies:	Page(s):
Pmt Received:	Processed By:	Comments: