

**SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO
CIVIL, CRIMINAL, PROBATE, AND TRAFFIC RECORDED PROCEEDINGS**

Request for Typed Copy of Recorded Proceedings

-Verify this matter was recorded before accepting any money-

Today's Date: _____ Case Name: _____

Dept/Courtroom: _____ Case No: _____ Date(s) of Hearing(s): _____

Requested by: _____ Phone Number: _____
Full Name

Address: _____

The Court will notify you by phone when the request has been completed. Copies are to be picked up within ten (10) court days of notification.

All typed copies are to be picked up at _____ . Any typed copy not picked up within 6 weeks of notification will be destroyed.

COST: \$40 Typed copy of RECORDED proceedings

Any typed copy exceeding 13 pages will require additional fees of \$3.00 per page. The Court will notify if any additional fees are due.

FEES MUST BE PAID IN THE APPLICABLE CLERK'S OFFICE (CIVIL, CRIMINAL, PROBATE, OR TRAFFIC) BEFORE YOUR REQUEST WILL BE PROCESSED.

Make checks payable to Fresno County Superior Court.

(Clerk's Office Use Only)

Receipt and minute order(s)/Register of Actions must be attached to this form.

DATE RECEIVED: _____

- | | |
|--|--|
| <input type="checkbox"/> Number of hearings: _____ | <input type="checkbox"/> Copy of Minute Order(s)/ Register of Actions attached |
| <input type="checkbox"/> \$_____ fee paid Receipt # _____ | <input type="checkbox"/> Case file attached |
| <input type="checkbox"/> Additional fee paid: _____ | <input type="checkbox"/> Request for file from Archives attached |
| <input type="checkbox"/> No fees due – Approved Waiver of Additional Court Fees and Costs on file. | |
| <input type="checkbox"/> Time Sensitive: _____ | |

(Reason)

Forward to: Court Reporter Manager, Room 402

(Administrative Use Only)

Date Received: _____ Initials: _____ Reporter: _____ Sent Reporter : _____
(Date)

Date Completed: _____ Comments: _____

Date(s) Customer Notified: _____

(Acknowledgement of Receipt)

Date Received: _____ Received By: _____