

COURT OF COMMON PLEAS
DIVISION OF DOMESTIC RELATIONS
HAMILTON COUNTY, OHIO

Plaintiff / Petitioner

-vs/and-

Defendant / Petitioner

Date: _____

Case No. _____

File No. _____

REQUEST FOR TRANSCRIPTION

I request that a transcript be prepared of the recorded hearing before Judge/Magistrate _____
(insert name)
heard on _____
(insert court dates)

The transcript is needed for a/n _____ scheduled before Judge/Magistrate
(insert type of hearing)
_____ on _____, 20____ and is to be filed by _____ (3 days prior to hearing).
(insert name) (insert court date) (insert date)

PLEASE MAKE THE APPROPRIATE SELECTIONS:

_____ Original
_____ Additional paper copy
_____ Electronic Copy
_____ Audio CD (\$25.00 per CD)

TRANSCRIPT PAGE RATES AS FOLLOWS:

Regular Rate..... \$4.50 per page
Expedited (by 8 a.m. the next calendar day)\$7.95 per page
1 to 5 business day (s).....\$5.95 per page
6 to 10 business days.....\$5.45 per page

Is a transcript to be filed by the court reporter?
_____ Yes _____ No

*The fee for a copy of a prepared transcript is \$0.10 per page for a paper copy or free for an electronic copy once the original copy is paid for.

Is transcript for a pending Court of Appeals case?
_____ Yes _____ No
Case No. _____

PAYMENT Info: You must contact Tina Wesley within three days at (513) 630-0211 for payment arrangements and for any other questions regarding the transcript request.

Signature

Print Name

Daytime Phone (MUST PROVIDE)

Email address

Fax No. (MUST PROVIDE)

Please return this completed form to the File Room 3-50.

FOR INTERNAL USE ONLY: _____ Minutes @ ☐ \$4.50 Regular Rate or ☐ \$ _____ Expedited
Rate = **TOTAL ESTIMATE: \$** _____

Estimate provided by: _____ via phone on _____. Estimate accepted
for further processing: ☐ YES ☐ NO on _____. ☐ No response as of _____.