



**CIRCUIT COURT FOR TALBOT COUNTY, MARYLAND  
COURT REPORTING SERVICES**

**REQUEST FOR COPY OF WRITTEN TRANSCRIPT**

**Date:** \_\_\_\_\_

Please complete and submit this form. Once your request has been received, the Court Transcriptionist will contact you to indicate the fee for your request. Once your payment has been received, the Transcriptionist will complete your request. If you do not hear from the Transcriptionist within five (5) days of submitting your request, please call (217) 231-1857.

**To:** Official Court Transcriptionist  
Circuit Court for Talbot County, Maryland  
2201 Vermont Street  
Quincy, Illinois 62301

**You may also submit this form electronically to  
jnkohn320@gmail.com**

**CASE NUMBER:** \_\_\_\_\_  
(Only One Case Number Per Form)

**CASE NAME:** \_\_\_\_\_

**DATE(S) OF PROCEEDINGS:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**JUDGE/MAGISTRATE:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUESTED BY:** \_\_\_\_\_

**ADDRESS:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CONTACT INFORMATION:**  
PHONE: \_\_\_\_\_  
FAX: \_\_\_\_\_  
EMAIL: \_\_\_\_\_

*Are you a party or an attorney representing a party in this case?* YES: \_\_\_\_\_ NO: \_\_\_\_\_

*Is this an appeal of a court hearing?* YES: \_\_\_\_\_ NO: \_\_\_\_\_

Except for proceedings closed pursuant to law, as otherwise provided by rule, or as ordered by the court, Maryland Rule 16-504 provides in part that upon written request and the payment of reasonable costs, the authorized custodian of an official recording shall make a copy of the audio recording available to any person.

**SIGNATURE OF THE REQUESTOR:** \_\_\_\_\_

**Note:** Official CDs generated from the original master recording are provided for listening purposes and verification of testimony only. They may not be used as the official court record in the place of a transcript. Transcripts cannot be produced using CDs. Only transcripts prepared and certified by the court's approved transcriptionists are deemed official and can be admitted as evidence. Completed orders left in this office longer than 30 days will be destroyed and your payment will be forfeited. Recordings cannot be mailed.

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DATE ESTIMATE PROVIDED _____	DATE PRODUCED _____	INITIALS OF EMPLOYEE _____
DATE MAILED _____	NAME OF INDIVIDUAL _____	