



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

REQUEST FOR COPY OF WRITTEN TRANSCRIPT

Date: _____

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

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.

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

CASE NUMBER: _____

CASE NAME: _____

(Only One Case Number Per Form)

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.

FOR OFFICE USE ONLY

DATE ESTIMATE PROVIDED _____ DATE PRODUCED _____ INITIALS OF EMPLOYEE _____

DATE MAILED _____ NAME OF INDIVIDUAL _____