



## LOCHBUIE MUNICIPAL COURT TRANSCRIPT REQUEST

Case/Summons Number \_\_\_\_\_ Date of Request \_\_\_\_\_

Violation Date \_\_\_\_\_ Court Date \_\_\_\_\_

Defendant's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Cell \_\_\_\_\_

Defendant's Date of Birth \_\_\_\_\_

Posting Party's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Indicate the information you need and list each document/portion of the recording requested. Please be as specific as possible

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**A \$250 DEPOSIT FOR A TRIAL TO THE COURT or  
A \$500 DEPOSIT FOR A TRIAL BY JURY  
MUST BE PAID AT THE TIME OF THE REQUEST, YOU ARE RESPONSIBLE FOR  
PAYMENT OF THE TOTAL AMOUNT DUE IF IT EXCEEDS THE DEPOSIT.**

The Transcript balance (if any) should be refunded to:

Defendant  Posting Party

Signature \_\_\_\_\_

Completion of transcripts may take 3 to 5 weeks.