

# Advantage Reporting

## COURT RECORDING AND TRANSCRIPTION SERVICES

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### TRANSCRIPT REQUEST FORM

PLEASE COMPLETE THE ENTIRE FORM AND SUBMIT BY FAX OR EMAIL

JUDGE: \_\_\_\_\_ CASE NO: \_\_\_\_\_

Case name: \_\_\_\_\_

Date(s) of hearing(s): \_\_\_\_\_

**There is a \$50.00 deposit required before transcript preparation; additional balance due (if any) may be required to be paid before transcripts are released. You can mail your deposit check to my attention at 467 Charlesina, Rochester, MI, 48306, or provide credit card information below:**

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APPEAL:                      Yes                      No                      (If yes, please also email copy of case caption)

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