

<p style="text-align: center;">Superior Court of California of San Luis Obispo</p> <p><input type="checkbox"/> San Luis Obispo Branch, Courthouse Annex, 1050 Monterey Street, Room 220, San Luis Obispo, CA 93408</p> <p><input type="checkbox"/> Grover Beach Branch, 214 South 16th Street, Grover Beach, CA 93433</p> <p><input type="checkbox"/> Paso Robles Branch, 549 10th Street, Paso Robles, CA 93446</p>	FOR COURT USE ONLY
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="flex: 1;">vs.</div> <div style="text-align: right; flex: 1;">Plaintiff,</div> </div> <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="flex: 1;"></div> <div style="text-align: right; flex: 1;">Defendant.</div> </div>	
REQUEST FOR DUPLICATE ELECTRONIC RECORDING	Case Number

*****This digital recording cannot be used for purposes of preparing a transcript on appeal in unlimited civil cases, family law cases, felony cases and juvenile cases. It may be used for purposes of preparing a transcript on appeal in limited civil cases, misdemeanor cases, infractions and traffic. Our court will not accept transcripts prepared by the parties for an appeal.**

Please select one of the following:

_____ I do not request the court prepare a transcript of the recording.

_____ I request the court prepare a transcript of the recording for appeal purposes with costs to be paid by requesting party. The court reporter will contact the requestor prior to the preparation of the transcript to arrange for the deposit and to confirm the total cost of the prepared transcript.

*****DATE APPEAL FILED:** _____

A defective duplicate electronic recording will be replaced or cost refunded. Refund requests due to incompatibility of format with your equipment will not be honored. For transcript requests and/or questions, please call the transcript request line at (805) 788-3454. **Cost: \$10.00 per CD:**

Requested

by: (NAME) _____

(ADDRESS) _____

(CITY, STATE, ZIP) _____

(TELEPHONE) _____

(BRANCH/COURTROOM WHERE RECORDING MADE) _____

(DATE OF RECORDING) _____

COURT USE ONLY

Date of Recording: _____

Number of CD's: _____ @ \$10.00 each.

Total: = \$ _____

_____ CASH _____ CHECK NUMBER _____

_____ VOUCHER

Pick-Up Location: _____

Date: _____

By: _____

Deputy Clerk

ACKNOWLEDGMENT

I hereby acknowledge receipt of the electronic recording(s) in the above-entitled action:

Date: _____

Signature

NAME (Please print)